

**PVG Application for Regulated Work with Children**

**Section 1: to be completed by the Applicant**

Please either type or use capitals

|  |  |
| --- | --- |
| Title |  |
| Full Name |  |
| Address (inc postcode) |  |
| Mobile number |  |
| Email address |  |
| Date of Birth |  |
| Please tick the boxes that applies to you: | I have had a PVG certificate in the past for working with children [ ] I have had a PVG certificate in the past for working with adults [ ] I am new to the PVG scheme [ ]   |
| Post applied for:  | [ ]  Coach | [ ]  Parent Helper |
| [ ]  Assistant Coach | [ ]  Child Wellbeing and Protection Officer |
| [ ]  Team Manager/Organiser | [ ]  Physiotherapist |
| [ ]  Course Tutor | [ ]  Sport Psychologist |
| Name of Cricket Club: |  |
| Date Self Declaration Form completed and retained by Club:    |  |

**Section 2: to be completed by the Club Child Wellbeing & Protection Officer (or authorised person)**

I confirm that I have seen the under noted documents (please tick all boxes that apply) and that they relate to the person identified above who is the subject of a PVG Scheme application.

**2 forms of ID must be seen, including one photo ID and one proof of address. If no photo ID is available then 3 forms of ID must be seen, 2 of which must show the applicant’s current address. Collectively the ID must confirm Date of Birth and Address. Address documentation must be dated within the previous three months.**

|  |  |
| --- | --- |
| [ ]  Birth Certificate | [ ]  Driving Licence (with photo) |
| [ ]  Passport | [ ]  Driving Licence (without photo) |
| [ ]  Other - please specify: |  |
| Authorised signatory (electronic or typed) |  |
| Name (capitals) |  |
| Position | Date |