**PALACE FOR LIFE FOUNDATION TRAINING COURSES APPLICATION FORM**

**Personal details of participant:**

PROGRAMME:

FORENAME(S):

SURNAME:

DATE OF BIRTH:

 / / / /

GENDER:

AGE:

Ethnicity: (Please Tick)

White- British Black or Black British - Caribbean

White – Irish Black or Black British - African

White – Gypsy or Irish traveller Black or Black British - Other

White – Other Asian or Asian British – Indian

Mixed White – Black Caribbean Asian or Asian British - Bangladeshi

Mixed White – Black African Asian or Asian British - Pakistani

Mixed White – Asian Asian or Asian British - Chinese

Mixed White – Other Asian or Asian British - Other

Other Ethnic Group

 Other Ethnic Group – Other (Please Specify) ………………………………………………………………………..

D

D

M

M

Y

Y

Y

Y

DISABILITY:

 None Yes (please specify)

………………………………………………………………………………………………………………………………

MEDICAL CONDITIONS:

 None Yes (please specify)

………………………………………………………………………………………………………………………………

**Contact details of Parent/ Guardian (or participant if 18 or over)**

ADDRESS:

POST CODE:

E-MAIL:

MOBILE NUMBER:

EMERGENCY

CONTACT TEL NO:

How did you hear about Palace for Life Foundation?

…………………………………………………………………………………………………………………....

……………………………………………………………………………………………………………………

The Programme for which you are applying: …………………………………………………………………

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**There is a 30 hour Placement that will take place over the period of 8 weeks**.

*The Programme requires significant commitment and input from trainees, so in terms the terms and conditions are very important as they set out the requirements for the programme, which apply to all recruits. By applying for this PL WORKS you confirm that you have read, understood and agreed the terms and conditions attached to this application form.*

**PALACE FOR LIFE FOUNDATION PL WORKS APPLICATION FORM**

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1. What skills could you bring to the programme? **(Please use no more than 200 words)**

Hint: describe your skills, personal qualities, knowledge and relevant experience

1. What would it mean to you to complete a Training Programme with Palace for Life Foundation? **(Please use no more than 200 words)**

Hint: Remember we are looking for someone who is committed and enthusiastic about completing the programme

1. Tell us how you think the programme will help develop your skills? **(Please use no more than 200 words)**

Hint: We want to select someone who will really benefit from the experience.

**PALACE FOR LIFE FOUNDATION TRAINING COURSE APPLICATION FORM**

**REFERENCES**

*You must discuss your application with your parent/guardian, who will have to read and agree the terms and conditions before you can submit it. Their completion of the details below confirms that you have discussed your application with them and that they have read and agreed the terms and conditions.*

**For parent/Guardian completion only:**

**I confirm that I have read and agree to the programme terms and conditions**

*Name……………………………………………………………………………………………. Mobile……………………………………………………...*

*Email…………………………………………………………………………………………………………………………………………………………….*

*If your application is successful and you are selected for the training programme, your parent or a guardian will also need to complete the consent form below, giving permission to participate in the* ***work placement****.*

*Please complete your application form and either post it to Susan Patterson-Smith, Palace for Life Foundation, Selhurst Park, Holmesdale Road, London SE25 6PU or email it to* *SusanPattersonSmith@palaceforlife.org*

**PALACE FOR LIFE FOUNDATION TRAINING COURSE APPLICATION FORM**

**SAFEGUARDING**

*Palace for Life Foundation is committed to keeping children, young people and vulnerable adults safe from harm. We take our Safeguarding responsibilities very seriously and all candidates working on our programmes are subject to Enhanced DBS checks and Safer Recruitment Procedures.*

**IMAGE PERMISSION**

Occasionally we may take pictures and allow filming for publicity purposes.

 I give permission for the taking and/or publication of images of my child by Palace for Life Foundation in accordance with the Foundation’s Child Protection Policy.

 I give my permission for my child to be interviewed and their comments to be broadcast or used in leaflets, posters, videos, press, magazines and other publications.

 I give my permission for my child to be interviewed and their comments/ images to be used on the Palace for Life Foundation website and social media, and online newsletters

**EQUAL OPPORTUNITY**

 *Palace for Life Foundation has an Equal Opportunities Policy. This is because we know that some people are discriminated against because of their age, race, sex, disability and / or sexuality. We want to make sure that our organisation is open to everyone and that we do not discriminate, in order to make sure we are operating fairly. We need to know who is and isn’t using the service. For this reason we would like you to help us by completing the following information.*

**TERMS AND CONDITIONS**

*The Foundation does not accept responsibility for any death, personal injury or loss or damage to property save to the extent that it results from the negligence of the Foundation, its employees and agents.*

*To make sure we are operating fairly. We need to know who is and isn’t using the service. For this reason we would like you to help us by completing the following information.*

**DATA PROTECTION NOTICE**

*All Information provided is confidential and will only be viewed by staff employed by Palace for Life Foundation including partner agencies. Please read our Privacy Policy at* [*http://PalaceforLifefoundation.org/privacy-policy/*](http://PalaceforLifefoundation.org/privacy-policy/)

**I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS, IMAGE PERMISSIONS AND THE DATA PROTECTION NOTICE**

SIGNED (Parent/ Guardian or participant if 18 or over): ……………………………………………………………………………….

PRINT NAME: …………………………………………………………………………………….. DATE: …………………………………