

[For OACP use only] Approval Number

**To be added to the approved Support with Confidence Personal Assistant listings,** ***all* of the information must be provided.**

**Checks will be carried out to verify it.**

**The details in the bold boxes will make up your public profile and will be displayed to the public on the OACP website.**

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| **Title** | | | | Mr | | **X** | Mrs | **X** | Miss | **X** | | | Ms | **X** | Dr | | | **X** | | | Prof | **X** | | | |
| **Your Full Name** | | | | | | | | | | | | | | | | | | | | | | | | | |
| First Name | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Middle Name[s] | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Family Name | |  | | | | | | | | | | | | | | | | | | | | | | | |
| All Previous Names | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Gender | | | | | | | | | | | Male | | | | | **X** | | | Female | | | | **X** | | |
| Date of Birth | **ddmmyyyy** | | | | | | | | | | | | | | | | | | | | | | | | |
| Nationality |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Daytime Telephone Number | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Mobile | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Email | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Public Liability Insurance | | | | | | | | | | | | Yes | | | | | **X** | | | No | | | | | **X** |
| Policy number | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Insurer | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Any restrictions on your right to work in the UK? | | | | | | | | | | | | Yes | | | | | **X** | | | No | | | | **X** | |

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| **Address History** | | | |
| **Date from** | **ddmmyyyy** | **Date to** | **ddmmyyyy** |
| House/ Flat Number |  | | |
| Address 1 |  | | |
| Address 2 |  | | |
| Address 3 |  | | |
| Postcode | **\_ \_ \_ \_ \_ \_ \_** | | |
| **Date from** | **ddmmyyyy** | **Date to** | **ddmmyyyy** |
| House/ Flat Number |  | | |
| Address 1 |  | | |
| Address 2 |  | | |
| Address 3 |  | | |
| Postcode |  | | |
| **Date from** | **ddmmyyyy** | **Date to** | **ddmmyyyy** |
| House/ Flat Number |  | | |
| Address 1 |  | | |
| Address 2 |  | | |
| Address 3 |  | | |
| Postcode |  | | |
| **Date from** | ddmmyyyy | **Date to** | ddmmyyyy |
| House/ Flat Number |  | | |
| Address 1 |  | | |
| Address 2 |  | | |
| Address 3 |  | | |
| Postcode |  | | |

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| --- | --- | --- |
| Date of last DBS check, or state never | **ddmmyyyy** | |
| Relevant training undertaken and dates |  | |
| **Course type** | | **Completed ddmmyyyy** |
|  | | **ddmmyyyy** |
|  | | **ddmmyyyy** |
|  | | **ddmmyyyy** |
|  | | **ddmmyyyy** |
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|  | | **ddmmyyyy** |
|  | | **ddmmyyyy** |
| Use additional sheet for further courses | | |

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| **Car Driver** | | | | Yes | | **X** | No | **X** |
| Full clean driving licence | **X** | Full licence with points | **X** | | I don’t have a licence | | | **X** |
| Are you insured to use your car for work? | | | | Yes | | **X** | No | **X** |

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| **Approximate charges:** | |
| Per hour 8am – 8pm Monday to Friday | £ |
| Per hour 8am – 8pm Weekends and Bank Holidays | £ |
| Per hour 8pm – 8am Overnight care | £ |
| Per task if appropriate | £ |

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| **Short description about you – max 100 words** [a summary of your personal qualities] |
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| **Which tasks are you interested in doing as a Personal Assistant?** | | | |
| Personal care | **X** | Social & Leisure activities | **X** |
| Domestic Assistance | **X** | Work or study support | **X** |
| Other, please state | | | |
|  | | | |

**Which area[s] are you planning to work in?**

| **Tick** | **Postcode** | **Including** |
| --- | --- | --- |
| **🗸** | **OX1** | Boars Hill, Oxford (Central and South), Kennington, New Hinksey, Osney, South Hinksey |
| **🗸** | **OX2** | Botley, Jericho, Oxford (North and West), North Hinksey, Summertown, Wytham, Wolvercote |
| **🗸** | **OX3** | Beckley, Elsfield, Headington, Marston, Noke, Oxford (North East), Woodeaton, Woodperry |
| **🗸** | **OX4** | Blackbird Leys, Cowley, Oxford (East), Iffley, Littlemore, Rose Hill, Sandford-on-Thames |
| **🗸** | **OX5** | Begbroke, Charlton-on-Otmoor, Fencott, Islip, Kidlington, Murcott, Tackley, Yarnton, |
| **🗸** | **OX7** | Bledington, Chadlington, Charlbury, Chipping Norton |
| **🗸** | **OX9** | North Weston, Postcombe, Thame, Towersey |
| **🗸** | **OX10** | Berinsfield, Cholsey, Dorchester, Wallingford |
| **🗸** | **OX11** | Aston Tirrold, Aston Upthorpe, Blewbury, Chilton, Didcot, Harwell, South Moreton, Upton |
| **🗸** | **OX12** | Ardington, Charney Bassett, Childrey, Challow (East & West), Denchworth, Farnborough (Berks), Fawley, Ginge (East & West), Grove, Hanney (East & West), Hendred (East & West), Kingston Lisle, Letcombe Bassett, Letcombe Regis, Lockinge (East &West), Lyford, Sparsholt, Wantage |
| **🗸** | **OX13** | Appleton, Bayworth, Besselsleigh, Cothill, Dry Sandford, Frilford, Garford, Longworth, Marcham, Shippon, Steventon, Southmoor, Sunningwell |
| **🗸** | **OX14** | Abingdon, Appleford-on-Thames, Burcot, Clifton Hampden, Culham, Drayton, Little Wittenham, Long Wittenham, Milton, Radley, Sutton Courtenay |
| **🗸** | **OX15** | Alkerton, Balscote, Barford St Michael, Barford St John, Bloxham, Bodicote, Brailes, Broughton, Deddington, Hempton, Drayton, Edge Hill, Epwell, Hook Norton, Horley, Hornton, Milcombe, Milton, North Newington, Ratley, Shenington, Sibford Ferris, Sibford Gower, Shutford, South Newington, Swalcliffe, Swerford, Tadmarton, Upton, Wigginton, Wroxton, |
| **🗸** | **OX16** | Banbury |
| **🗸** | **OX17** | Adderbury, Appletree, Aynho, Arlescote, Chacombe, Charlton, Cheney, Chipping Warden, Claydon, Cropredy, Culworth, Edgcote, Farnborough (Warks), Greatworth, Great Bourton, Hanwell, King's Sutton, Little Bourton, Lower Thorpe, Marston St Lawrence, Middleton Mollington, Nethercote, Newbottle, Overthorpe, Prescote, Shotteswell, Stuchbury, Sulgrave, Thenford, Thorpe Mandeville, Twyford, Upper Astrop, Wardington, Warkworth, Warmington, Williamscott |
| **🗸** | **OX18** | Alvescot, Asthall, Aston, Bampton, Barrington, Black Bourton, Bradwell, Brize Norton, Burford, Carterton, Chimney, Clanfield, Cote, Fulbrook, Grafton, Holwell, Lew, Little Clanfield, Radcot, Shilton, Signet, Swinbrook, Taynton, Upper Windrush, Upton, Weald, Westwell, Widford, Windrush |
| **🗸** | **OX20** | Bladon, Glympton, Kiddington, Woodleys, Woodstock, Wootton |
| **🗸** | **OX25** | Ambrosden, Arncott, Blackthorn, Caulcott, Duns Tew, Little Chesterton, Lower Heyford, Merton, Middle Aston, Middleton Stoney, North Aston, Piddington, Rousham, Somerton, Steeple Aston, Steeple Barton, Upper Heyford, Wendlebury, Weston-on-the-Green |
| **🗸** | **OX26** | Bicester, Chesterton, Launton |
| **🗸** | **OX27** | Ardley, Bainton, Baynards Green, Bucknell, Caversfield, Charndon, Fewcott, Fringford, Fritwell, Godington, Hardwick, Hethe, Marsh Gibbon, Newton Morrell, Poundon, Souldern, Stoke Lyne, Stratton Audley, Tusmore |
| **🗸** | **OX28** | Witney |
| **🗸** | **OX29** | Barnard Gate, Brighthampton, Church Hanborough, Combe, Crawley, Curbridge, Ducklington, Eynsham, Freeland, Hailey, Hardwick, High Cogges, Long Hanborough, New Yatt, Newbridge, North Leigh, East End (North Leigh), Old Shifford, Shifford, Standlake, Stanton Harcourt, Stonesfield, Sutton, Yelford |
| **🗸** | **OX33** | Forest Hill, Holton, Horspath, Horton-cum-Studley, Littleworth, Milton Common, Stanton St. John, Waterperry, Waterstock, Wheatley, Woodperry |
| **🗸** | **OX39** | Chinnor, Crowell, Emmington, Henton, Kingston Blount, Sydenham |
| **🗸** | **OX44** | Ascott, Chalgrove, Chippinghurst, Chiselhampton, Cuddesdon, Denton, Garsington, Great Haseley, Great Milton, Little Baldon, Little Haseley, Little Milton, Marsh Baldon, Nuneham Courtenay, Stadhampton, Toot Baldon |
| **🗸** | **OX49** | Aston Rowant, Brightwell Baldwin, Britwell Salome, Christmas Common, Cuxham, Easington, Lewknor, Pyrton, Shirburn, Watlington |

**On which days and times would you like to work? Add specific hours if needed.**

| **Day** | **Morning** | **Afternoon** | **Evening** | **Night** |
| --- | --- | --- | --- | --- |
| **Monday** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Tuesday** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Wednesday** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Thursday** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Friday** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Saturday** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Sunday** | **🗸** | **🗸** | **🗸** | **🗸** |

**Rehabilitation of Offenders Act 1974 Declaration**

**Part A – Criminal Record Declaration (Regulated Activity)**

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| The role you are applying for is ‘exempt’ from the Rehabilitation of Offenders Act 1974 and therefore, you are required to declare any convictions, cautions, reprimands and final warnings that are not ‘protected’ (i.e. filtered out) as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013). The amendments to the Exceptions Order provide that certain ‘spent’ convictions and cautions are 'protected' and are not subject to disclosure to employers, and cannot be taken into account. In the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by The Disabilities Trust. Any information given will be completely confidential. | | | |
|  | | | |
| Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)? | | | |
| **YES** | **🗸** | **NO** | **🗸** |
| Further information to assist you in answering this question is available at:  <https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/338933/Filtering_guide_v2.3.pdf> | | | |
|  | | | |
| Are there any alleged offences outstanding against you (in the UK or any other country) including a current police investigation and/or prosecution? | | | |
| **YES** | **🗸** | **NO** | **🗸** |
|  | | | |
| Are you currently subject to any investigation or proceedings by anybody, having regulatory functions, in relation to health/social care professionals, including such a regulatory body in another country? | | | |
| **YES** | **🗸** | **NO** | **🗸** |
|  | | | |
| Have you ever been banned from working with protected / vulnerable adults or children in accordance with Disclosure and Barring Service (or Protecting Vulnerable Groups - Scotland) schemes? | | | |
| **YES** | **🗸** | **NO** | **🗸** |
|  | | | |
| **Part B - Criminal Record Declaration (Non Regulated Activity)** | | | |
| This role is ‘not exempt’ from the Rehabilitation of Offenders Act. We only ask applicants to disclose convictions which are not yet ‘spent’ under the Rehabilitation of Offenders Act 1974. | | | |
| Do you have any ‘unspent’ convictions? | | | |
| **YES** | **🗸** | **NO** | **🗸** |
| Under the Rehabilitation of Offenders Act 1974, after a specific period of time has passed (which varies according to the sentence or disposal received), cautions and convictions are regarded as ‘spent’. Once a caution or conviction becomes spent, an individual is treated as rehabilitated with regards to that offence, and they don’t have to declare it for most purposes, for example when applying for employment or insurance. | | | |

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| **Please provide two References. At least one must be a recent Employer.**  **OACP will contact these people as part of your application.** | |
| **Reference 1** | |
| Name |  |
| Address 1 |  |
| Address 2 |  |
| Address 3 |  |
| Telephone number |  |
| Email address |  |
| Relationship to you |  |
| How long has this Referee known you? | **mm yyyy** |
| **Reference 2** | |
| Name |  |
| Address 1 |  |
| Address 2 |  |
| Address 3 |  |
| Telephone number |  |
| Email address |  |
| Relationship to you |  |
| How long has this Referee known you? | **mm yyyy** |

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| **Terms and Conditions of Registration and Approval** |
| Membership is subject to compliance with our Terms and Conditions and Code of Conduct as published by us on the Support With Confidence web-page.  <https://oacp.org.uk/support-with-confidence>  Please note that as part of the application process we will carry out checks on you.  By signing this form you are agreeing to these checks. |
| **Payment** |
| Approval is subject to payment for your Disclosure and Barring Service Check.  We will contact you when this is due. |

**I declare that the information provided on this form is correct.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[This form is deemed ‘signed’ when returned by email]

Date: **dd yy mmmm**

Only forms submitted electronically will be accepted.

**Please return this form to** [**supportwithconfidence@oacp.org.uk**](mailto:supportwithconfidence@oacp.org.uk)

*If you have any questions please call 01491 822604.*

*Thank you, and we look forward to hearing from you.*

*Oxfordshire Association of Care Providers*

*September 2016*