

Office Use Only	
Disclosure Number	
Date of Issue	

Once completed please contact Childemployment@havering.gov.uk to arrange an appointment – Appointments will be held at the below address:
Romford Public Advice & Services Centre
20-26 The Liberty, Romford RM1 3RL

[The Children & Young Persons Act 1963](#)
[The Children \(Performances and Activities\) \(England\) Regulations 2014](#)

Application for Approval as a Matron
(Chaperone to Children Employed in Entertainments)

ALL DETAILS TO BE COMPLETED IN **BLOCK CAPITALS**
 (Where there is an asterisk, please delete as appropriate)

Mr/Mrs/Miss/Ms/other* Surname:		Forenames:		
Date of Birth:		Email:		
Previous names:				
Address (including postcode):				
Telephone No: (days)		(evenings)		
Number and ages of own children:	Child 1	Child 2	Child3	Child4
		YRS		YRS
Name and address of current/most recent employer:				
Position Held:		Date started:		
Date left:				
Name and address of previous employer:*				
Position Held:		Date started:		
Date left:				
Please state reasons for any gaps in employment: *				
1)				
		Date finished employment:		
		Date started employment:		
2)				
		Date finished employment:		
		Date started employment:		
*Please use a separate sheet for additional employers and if you have any further gaps in employment				

Any qualifications relating to work with children, or to performing arts:

Qualification	Date	Awarding Body

If qualified as a teacher or youth worker, give your DES/DoE/DFES No:

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Do you hold a Safeguarding Children Training Certificate? *Yes/No**

*If 'Yes' please give the date you attended and ensure you bring with you your certificate.
**In order to obtain a chaperone licence you must have received Safeguarding Children training.

Please explain why you feel you are suitable to the role of a chaperone:

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Do you hold a First Aid Certificate? * Yes/No

*If 'Yes' please give the date and awarding body and expiration date:

Reasons for applying to become a matron/chaperone:

Experience of paid or voluntary work with children (use a separate sheet if necessary):

Experience of theatre, film, TV or modelling work for yourself, or supervising a child (use a separate sheet if necessary):

Have you previously been approved as a matron/chaperone? *Yes/No

If 'Yes' please give dates and name of Authority:

Have you previously been refused an application as a matron/chaperone? Yes/ No
If 'Yes' please give dates and name of Authority:

Have you been approved as a registered child minder or foster-parent? Yes/ No
If 'Yes' please give the date, name and address of the Social Services Department which registered you:

Are you registered as a disabled person? Yes/ No
If 'Yes' please state your disability and registration number:

Do you have any health problems or disability that could affect you in working as a matron/chaperone? Yes/ No

*If 'Yes' please enclose a letter from your GP or specialist stating that you are able to look after children working in entertainment.

Do you have a full current Driving Licence? Yes/ No

Do you have any penalty points? Yes/ No

If 'Yes' please give details:

Does your car insurance cover you to carry passengers in connection with your business? Yes/ No

(If you are not sure, check with your insurers. If the car is insured for business use but you are not the main driver or you named different employment in your original application, make sure that you are covered for transporting children within your care for employment purposes i.e. matron/chaperone.)

Do you have any criminal convictions? Yes/ No

If 'Yes' please give details of all the offence(s) and the outcome of the hearing(s):

Have you been charged with any offence for which you are awaiting prosecution? Yes/ No

If 'Yes', please give details of the offence:

Are you known to Social Services? Yes/ No If 'Yes' please give details:

Please give the names, email addresses and occupations of two referees who can give you a reference as to your suitability to be a matron/chaperone (preferably from a previous work placement & a person qualified to provide a reference e.g. Solicitor, Accountant etc.) Both must have known you for more than five years and neither can be related to you.

*Mr/Mrs/Miss/Ms/Other:	*Mr/Mrs/Miss/Ms/Other:
Email:	Email:
Address:	Address:
Occupation:	Occupation:

I hereby declare that the above information is true to the best of my knowledge. I understand that I would be liable to prosecution if I have wilfully stated in it anything which I knew to be false, or did not believe to be true.

Signed: _____ Date: _____

"The Licensing Authority shall not approve a matron (chaperone) unless they are satisfied that s/he is suitable and competent"

(Regulation 12(2), Children (Performances) Regulations 2014).

"Any person who knowingly or recklessly makes any false statement in or in connection with an application for a licence shall be liable on summary conviction to a fine not exceeding £1000, or imprisonment for a term not exceeding three months, or both."

(Children and Young Persons Act, 1963, Part 11, Section 40).