CLUB WELFARE OFFICER APPLICATION FORM

|  |  |
| --- | --- |
| Club Name |  |
| Club Number |  |

**APPLICANT DETAILS**

|  |  |
| --- | --- |
| Full Name |  |
| Postal Address |  |
| Landline Telephone Number |  |
| Mobile Telephone Number |  |
| Email |  |
| British Judo Membership Number (if held). Free membership can be obtained via membership. 0121 728 6920 |  |

|  |  |
| --- | --- |
| Are you a Coach at the above Club | Yes / No |
| Are you related to a Coach at the above Club | Yes / No |
| *Reason for Applying:* | |

**CLUB WELFARE OFFICER APPLICATION FORM**

**REQUIREMENTS**

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| **DBS Information**   1. ***We will accept DBS commissioned by BJA.*** 2. ***OR DBS that is registered with the update service. Please complete the consent form below, for BJA to be able to access your DBS.***   [***https://www.britishjudo.org.uk/the-british-judo-association/safeguarding-new/disclosure-and-barring-service/dbs-update-service-consent-form/***](https://www.britishjudo.org.uk/the-british-judo-association/safeguarding-new/disclosure-and-barring-service/dbs-update-service-consent-form/)   1. ***If NO DBS - Please supply a link for me to complete a new DBS***   ***Name……………………………………………………………………………………………………………………………………………….***  ***Email address………………………………………………………………………………………………………………………………….*** |

**TRAINING**

I confirm that within the last 3 years I have attended:

|  |
| --- |
| **Sports Coach UK Safeguarding &** Yes / No ***Date Attended:***  **Protecting Children Course** |
| **Time to Listen Course** Yes / No ***Date Attended:***  A letter of intent to attend a British Judo Time to Listen Course will also be accepted if the Club Welfare Officer has been unable to identify an accessible course. Please attach a photocopy with submission of this form. |

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| **GDPR**  I confirm that I have read and understood the details contained in the *‘Introduction to General Data Protection Regulations – GDPR Guidance for Clubs – April 2018’*  Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

When scanning this form, please ensure that the following documents have been read and included if required:

|  |  |
| --- | --- |
|  | *Please Tick* |
| Role Description provided and read. |  |
| GDPR Policy policy provided and read |  |
| Application form (completed) |  |
| DBS Certificate – Should be issued by BJA or consent given to check on the update service. |  |
| Scanned copy of **Sports Coach UK Safeguarding & Protecting Children (SPC) Course Certificate** |  |
| Scanned copy of **Time to Listen Certificate (TTL)** or **Letter of Intent** to attend this course |  |

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your time in completing this form

Please return to :-

***CWO Applications***

**British Judo Head Office**

University of Wolverhampton (Walsall Campus)

Gorway Road

Walsall

West Midlands

WS1 3BD