



## **AYLESBURY VALE ADVOCATES**

### **APPLICATION FORM FOR A PROSPECTIVE ADVOCATE**

<b>NAME:</b>	<b>AGE GROUP: 18-30 31-50 51+</b>
<b>ADDRESS:</b>	<b>TEL NO's:</b>
<b>POST CODE:</b>	<b>Email:</b>
<b>Present occupation:</b>	
<b>Previous employment:</b>	
<b>Any voluntary work undertaken:</b>	
<b>The main skills and abilities you will bring to the role of advocate:</b>	
<b>Having read the enclosed information, do you feel you would prefer to work with Learning Disability or Mental Health clients ?</b>	

<b>Why do you want to be an advocate?</b>	
<b>Where did you hear of AVA ?</b>	
<b>Professional, academic or other qualifications:</b>	
<b>Are you a car owner?</b>	
<b>I would like to become an advocate. I give AVA permission to seek references from the two people named below. They are over 18 years old and are not related to me:</b>	
<b>Name:</b>	<b>Name:</b>
<b>Address:</b>	<b>Address:</b>
<b>Tel No:</b>	<b>Tel No:</b>

**Signature .....**      **Date: .....**

***PLEASE NOTE that, as AVA advocates deal with vulnerable people, we are obliged to carry out police checks on all our staff and volunteers. In the case of volunteers, this will not take place until the applicant has completed the Training Course and has confirmed their desire to become a volunteer advocate, and simply requires the completion of a form for submission to the Criminal Records Bureau.***

**ALL VOLUNTEER ADVOCATES:**

**Please read the following carefully, complete as appropriate, sign and return to AVA with your application form.**

**REHABILITATION OF OFFENDERS ACT 1974**

**Prior to volunteering as an Advocate with AVA you are requested to disclose to AVA full details of ALL previous convictions recorded against you, including those which may be deemed spent under the provisions of the Rehabilitation of Offenders Act 1974.**

**If you have been convicted of any offence, please give details below. If not, write 'NONE'.**


**FAILURE TO DISCLOSE ANY PREVIOUS CONVICTION OR THE SUPPLYING OF MISLEADING OR INACCURATE INFORMATION UPON THIS FORM COULD RESULT IN YOUR DISMISSAL AS AN ADVOCATE.**

**Signed ..... Date .....**