

## Horse Sport Ireland Adult Information Form

*(All information supplied on this form will be treated confidentially)*

<b>Full Name:</b>		<b>Previous Name:</b>	
<b>Role</b>		<b>Date of Birth:</b>	
<b>Place of Birth:</b>			
<b>Current Address</b>			
<b>Previous Address:</b>			
<b>Please list below all Sporting/ NGB Qualifications (if any):</b>			
<b>National Governing Body</b>		<b>Qualification Held</b>	

**HAVE YOU COMPLETED CHILD PROTECTION AWARENESS/SAFEGUARDING TRAINING?**

Yes:  No:

If yes, please state approximate date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**EVERY INDIVIDUAL WHO WISHES TO JOIN OR CARRYOUT A ROLE WITH HSI SHOULD FAMILIARISE THEMSELVES WITH THE CODE OF ETHICS & GOOD PRACTICE FOR YOUTH SPORT IN HSI (IN PARTICULAR THE VARIOUS CODES OF CONDUCT).**

*Do you agree to abide by the guidelines and Codes of Conduct contained in the Code of Ethics & Good Practice for Youth Sport in HSI?*

Yes:  No:

**Have you ever been asked to leave a sporting/youth organisation?**

Yes:  No:

*(If you have answered yes, we will contact you in confidence)*

**REFERENCES:**

*Please supply the name, address and telephone of two people who we can contact and who, from personal knowledge, are willing to endorse your application. One of these names should be, where possible, the name of an Administrator / Leader in your last Club / place of involvement*

**Name and Address of Referee 1:**

**Name and Address of Referee 2:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

**Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

<b>FOR OFFICIAL HSI USE ONLY:</b>	
Applicant Name:	
Date application received:	
Date of interview:	
Interviewed by:	1. 2.
References received and are satisfactory:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Vetting check completed & returned (if appropriate):	Yes <input type="checkbox"/> No <input type="checkbox"/>
Code of Ethics/Safeguarding training completed (or to be done?)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Code of Conduct to be signed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Proof of applicants identification received:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Identification type:	
Recommendation (with reasons)	Approved <input type="checkbox"/> Not approved <input type="checkbox"/>

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

**Position in HSI** \_\_\_\_\_

**CONFIDENTIAL REFERENCE FORM**

*(This form can be used as a telephone reference or used as a written reference)*

The following person: \_\_\_\_\_ (**list name**) has expressed an interest in working with Horse Sport Ireland (Affiliate) as: \_\_\_\_\_ (**list position**).

*If you are happy to complete this reference, any information will be treated with due confidentiality and in accordance with relevant legislation and guidance. Information will only be shared with the person conducting the assessment of the candidate’s suitability for the post, if they are offered the position. We appreciate you being extremely candid, open and honest in your evaluation.*

**How long have you known this person?** \_\_\_\_\_

**In what capacity do you know this person?**

**What attributes does this person have that would make them suited to this work?**

**Please rate this person on the following (*tick one box for each statement*)**

	Poor	Average	Good	Very Good	Excellent
<b>Responsibility</b>					
<b>Maturity</b>					
<b>Self-motivation</b>					
<b>Can motivate others</b>					
<b>Energy</b>					
<b>Trustworthiness</b>					
<b>Reliability</b>					

This post may involve substantial access to young people. In HSI we are committed to the welfare and protection of young people. Would you have any reason at all to be concerned about this applicant being in contact with children and young people? *(Please tick)*

Yes: \_\_\_\_\_ No: \_\_\_\_\_

In Northern Ireland have you referred this individual to the Disclosure & Barring Service list for barring?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

*(If you answer “Yes”, we will contact you in confidence)*

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

**Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Position in Organisation:** \_\_\_\_\_

**Name of Club/Organisation:** \_\_\_\_\_

**DISCLOSURE OF CRIMINAL CONVICTIONS/CAUTIONS FOR LEGIBLE POSITIONS**

*(Please read this information carefully)*

**Statement of non-discrimination**

Horse Sport Ireland is committed to equal opportunity for all applicants including those with criminal convictions. Information about criminal convictions is requested to assist the selection process and will be taken into account only when the conviction is considered relevant to the post. Any disclosure will be seen in the context of the job criteria, the nature of the offence and the responsibility for the care of existing members, volunteers and employees.

For the purposes of your application for the post of:

**HSI Role:** \_\_\_\_\_

We require all coaches/volunteers in positions of responsibility for managing the safety and development of young people to sign the declaration and return it marked confidential to Horse Sport Ireland Ireland National Children’s Officer or your Affiliate Children’s Officer as appropriate.

Should you require further information, please contact **the Horse Sport Ireland National Children’s officer/DSCO**.

**Name of Applicant:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Contact No:** \_\_\_\_\_

**Affilaite:** \_\_\_\_\_

The purpose of the check is to make sure that people are not appointed who might be a risk to children or vulnerable adults.

The check will tell us whether you have a criminal record, caution, or whether any other information about you held on barred lists may have a bearing on your suitability. Any information which we receive will be treated confidentially, and will be discussed with you before we make a final decision. After that decision is made the information returned from AccessNI will be destroyed.

**Advice to Applicants**

You have applied for a role which falls within the definition of an “excepted” position as provided by the Rehabilitation of Offenders (Exceptions) Order (NI) 1979: therefore ALL convictions including SPENT convictions that are not protected by the 2014 amendments MUST be disclosed. The disclosure of criminal history information will not debar you from participating as a volunteer unless the **Horse Sport Ireland Vetting Referrals Committee** considers that the information renders you unsuitable for the role applied for. In making this decision the **Horse Sport Ireland Vetting Referrals Committee** will consider the nature of the offence/caution, how long ago it was committed and what age you were at the time and other factors which may be relevant. This information will be verified through an appropriate Access NI Enhanced Disclosure check. If you are currently facing prosecution for a criminal offence you should also bring this to our attention given the “excepted” nature of the role.

**Thank you for your co-operation.**

Do you have any convictions/cautions that are not "protected" as defined by the Rehabilitation of Offenders (Exceptions) (Amendment) Order (Northern Ireland) Order 2014. Been barred by the Disclosure and Barring Service (formally the Independent Safeguarding Authority) which would prevent you from working with children and/or vulnerable adults or the subject of an investigation alleging that you were the perpetrator of adult or child abuse?

Yes

No

If so, please state below the nature, date(s) and sentence of the offence(s), date prevented from working in this area or allegations:

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Please provide any other information you feel may be of relevance such as:

- the circumstances of the offence/caution/incident
- a comment on the sentence received
- any relevant developments in your situation since then
- Whether or not you feel the conviction has relevance to this post.

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*Please continue on a separate page if necessary.*

**(If you require further information on what information to disclose please contact NIACRO Helpline Tel: 028 90 320157)**

**Declaration**

I understand that I must also complete an AccessNI Disclosure Certificate Application Form and that this check must be carried out before my application for registration/ appointment can be confirmed. This has been explained to me and I am aware that spent convictions/cautions may be disclosed. I declare that the information I have given is accurate.

Have you ever been known to any Social Services department as being a risk or potential risk to children?	<b>YES / NO</b> <i>(if Yes, please provide further information below):</i>
Have you been the subject of any disciplinary investigation and/or sanction by any organisation due to concerns about your behaviour towards children?	<b>YES / NO</b> <i>(if Yes, please provide further information)</i>
Confirmation of Declaration <i>(tick box below)</i>	
	I agree that the information provided here may be processed in connection with my volunteer role and I understand that any role may be withdrawn or dismissal may result if information is not disclosed by me and subsequently come to the organisation’s attention.
	I agree to inform the organisation within 24 hours if I am subsequently investigated by any agency or organisation in relation to concerns about my behaviour towards children or young people.
	I understand that the information contained on this form and information supplied by third parties may be supplied by Gymnastics Ireland to other persons or organisations in circumstances where this is considered necessary to safeguard other children.

*I declare that any answers are complete and correct to the best of my knowledge and I will inform Horse Sport Ireland of any future convictions or charges.*

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_