

ACROSS
 St Mark's Community Centre, 218 Tollgate
 Road, Beckton, London E6 5YA
 Tel: 01499 302715 Fax: 01499 302716
 e-mail: pilgrimages@across.org.uk
 website: www.across.org.uk
 ACROSS is a company limited by guarantee registered in Scotland
 No. SC255558 and is a recognised charity no. SC030126



Please E-mail a head & shoulders
 picture of yourself to
pilgrimages@across.org.uk
 It will be used to create your
 personalised name badge

HELPER / NURSE / DOCTOR / CHAPLAIN Application Form

CONFIDENTIAL

(Circle as appropriate) Please print clearly in BLACK INK

Group No:

Title			Surname		
First Name			Known As (if appropriate)		
Address					
Town			Post Code		
Date of Birth					
<i>It is important that all of our groups have a balanced team of helpers of all ages, which is why we ask for your date of birth here</i>					
Contact Details	Home No:			Work No:	
	Mobile No:			E-Mail:	
Passport	Passport No:			Expiry Date:	
Nationality	Do you require a VISA to Travel ?			Yes / No	
EHIC Card	Expiry Date:				
Do you intend taking out ACROSS Insurance ?			Yes / No		
If NO above please confirm your Insurance Provider					
Insurance Policy No			Valid From - Until		
When are you available to travel (dates or Group Number)?					
Can you travel at short notice ?	Y / N	How much notice do you require ?			
Have you travelled to Lourdes before ?	Y / N	With ACROSS		Y / N	
Please state previous relevant experience (for example as a carer, nurse, volunteer, family experience, with ACROSS)					
Are you accompanying anyone?					
Person to Contact in case of Emergency (not someone who is travelling with you)					
Name					
Relationship					
Address					
Town			Post Code		
Contact Details	Home No:			Work No:	
	Mobile No:			E-Mail:	

GP Details	
Name	
Address	

Relevant information concerning your capabilities and/or illnesses. Please include any specific diagnosis of ill health or on-going medical condition.

Please list any medications/injections that you use regularly or provide a copy of your repeat prescription
YOU MUST BRING A 12 DAY SUPPLY OF ALL MEDICATION IN YOUR HAND LUGGAGE

Do you have any KNOWN ALLERGIES? Yes / No
 If **YES**, please specify here;

Please indicate any dietary requirements (e.g. Vegetarian, Gluten Free). The hotel serves a set menu, which may include veal & fish. The staff are helpful in accommodating special diets but need to know in advance. If you have special dietary needs including food allergies, please note them here.

Are you fit and able?		Can you push a wheelchair?	
Have you pushed a wheelchair before?		Can you push uphill	

NURSE APPLICANTS ONLY	DOCTOR APPLICANTS ONLY
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Place of Work:		Place of Work:	
Position Held		Position Held	
Nursing Speciality		Medical Speciality	
Date of NMC Registration		Date of GMC Registration with a licence to practice	
PIN No		Expiry Date	
GMC No		Expiry Date	
Member of Professional Body for indemnity cover	Y/N	Member of Professional Body for indemnity cover	Y/N
RCN / RCM / Other Membership No		MDU / MDDUS / MPS / MSS / Other No	
If retired/non-practising – for how long?		If retired/non-practising - for how long?	
In the last 24 months have you;		Are you up to date with Basic Resuscitation Techniques?	Y/N
Completed M&H Update ?	Y/N		
Completed an Infection Control & Prevention Update ?	Y/N		
Completed a Basic Resuscitation Techniques Update ?	Y/N		

CHAPLAIN APPLICANTS ONLY

Date Ordained		Current Diocese	
Current Position		Place of Work	

Please ensure this section is completed fully before returning your application form

Safe Guarding Certificates

ACROSS is registered with the Disclosure and Barring Service (DBS), Protecting Vulnerable Groups Scheme (PVG) and Disclosure Scotland. All helpers travelling must have a qualifying certificate.

Failure to have a qualifying certificate will mean that you will not be allowed to travel as a member of the ACROSS group. These procedures are for the protection of you and the VIP's in our care.

Certificates issued are valid with ACROSS for three years from date of issue. e.g. if your certificate was issued on the 1 st May 2014 and you are travelling on the 4 th May 2017 you will be required to renew your certificate.		
		Please tick as appropriate
I already have an ACROSS DBS / PVG which qualifies me for travel	Dated:	
I require an application for a DBS / PVG		

Personal Disclosure

Are you "barred" from working (paid or unpaid) with children or vulnerable adults?	Yes / No
Please disclose whether you are the subject of an investigation and/or disciplinary proceedings by your professional body or are not permitted to practice by your professional body. Please give details of any criminal convictions, cautions or criminal proceedings pending. As a volunteer with ACROSS you will be in contact with children and vulnerable adults and may not rely upon the provisions of the Rehabilitation of Offenders Act 1974 so far as it relates to disclosure of previous convictions. All convictions, however old, must be declared on each application unless already known by ACROSS and you are not a "new" helper.	
This information will be treated in confidence. Many offences have no relevance to a person's ability or suitability to work with children and vulnerable adults.	
Self-Declaration Scotland Candidates are therefore required to disclose any unspent convictions or cautions and any spent convictions for offences included in schedule A1, "OFFENCES WHICH MUST ALWAYS BE DISCLOSED" of the Rehabilitation of Offenders Act (Exclusions and Exceptions) (Scotland) Amendment order 2015. Candidates are not required to disclose spent convictions for offences included in Schedule B1, "OFFENCES WHICH ARE TO BE DISCLOSED SUBJECT TO RULES" until such time as they are included in a higher level disclosure issued by Disclosure Scotland.	
This information will be treated in confidence. Many offences have no relevance to a person's ability or suitability to work with children and vulnerable adults.	

Publicity

On occasion, photographs, videos and audio of participants in ACROSS activities may on occasion be submitted to newspapers, ACROSS newsletters, websites, social media or put on display. Please indicate if you have any objections and are not prepared for your image to be used this way by ticking the box.

Signature:

Date