

Application for paid or voluntary work with vulnerable people

Full Name

Maiden or former name

Address

.....

Any previous address in the last 5 years

.....

Previous church in the past 5 years

E-mail.....

Telephone (home) Telephone (work)

Languages spoken:

Own children in classes at Holy Trinity:

Age Group with which you hope to work

All Volunteers

Please also complete and submit a [Confidential Declaration form](#).

New Volunteers Only

Please attach a copy of your Belgian ID card and provide names, emails, and telephone numbers of two referees who know you well, but who are not related to you. One a pastor and one who can comment on your abilities with and attitudes to children and young people.

Referee 1:	Referee 2:
Telephone	Telephone
Email	Email

Signed Date