# ADULT HORMATION FORM.



This form is to be used by any person over 18 years of age who wishes to help with Scouting, or become a member of Scout Network.

The form is designed so that the information is collected in the correct order to help input the data onto Compass, The Scout Association's online membership system.

Your personal data will be stored on Compass to support your application process and your current and potential future involvement in Scouting. It is also kept for monitoring purposes. Some information is considered sensitive personal data under the Data Protection Act 1998 and as such will be managed as required under the act. Further information can be found at **scouts.org.uk/dataprotection** 

# **Ethnicity and Religious Information**

Other ethnic group

☐ Prefer not to say

☐ Arab☐ Other

This information is requested by The Scout Association to help in monitoring its membership. The data will help the Association in understanding the makeup of the membership; monitoring progress against its inclusivity objective, and prioritising development work both nationally and locally, and will identify and help Leaders meet any specific needs of individuals.

You can update your personal information on Compass, after registering, at any time.

Once the information has been added to Compass, this form will not be retained.

| Please complete in block capitals. Red outlined boxes are compulsory fields on Compass.   |
|---|
| Title   |
| Surname   |
| Previous Surname  |
| Forename(s)   |
| Date of Birth   |
| Gender M F  |
| Postcode  |
| Member Number (if known)  |
| Known as  |
| Nationality   |
| Ethnicity (please tick appropriate box; recorded for statistical purposes)  White English/Welsh/Scottish/Northern Irish/British Irish Gypsy or Irish Traveller Any other White background |
| Mixed/multiple ethnic groups  White and Black Caribbean  White and Black African  Mixed/multiple ethnic background  |
| Asian/Asian British Indian Pakistani Bangladeshi Chinese Any other Asian background   |
| Black/African/Caribbean/Black British  African  Caribbean  Any other Black/African/Caribbean background   |

| <b>th</b> (please tick as appropriate; record  | led for statistical purpose  | es)   |  |
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| Scouting   |  |   |  |
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| ion for the HMRC is not collected using nbers Area of <b>scouts.org.uk</b> , in the fund   | this adult information form<br>draising section.   | . It should be recorded in a s  | uitable format, such as the form that can be   |
| ormation   |  |   |  |
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| <b>es</b> (Please indicate in the small box w  | vhich email is your prima  | ry contact)   |  |
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| <b>Telephone Numbers</b> (Please indicate in the sma  | ll box which phone number is your primary contact)   |
|---|--|
| ☐ Home  |  |
| ☐ Mobile Number   |  |
| ☐ Other   |  |
|   |  |
| Social Media username (Facebook, Twitter, Goog  | le+)   |
|   |  |
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| Communications Preferences  |  |
| The Association, at all levels, will use your details   | to contact you with information relevant to Scouting.  |
| Additionally, from time to time we would like to local Scouting in your area (Group, District etc). | contact you with details of news, products, offers and services from The Scout Association and   |
| Let us know if you would prefer not to recei  | ve information about any of the following:   |
| I do not wish to receive details:   |  |
| about Scout Activity Centres and campsites  |  |
| of events and fundraising opportunities   |  |
| ☐ from Scout Shops Ltd  |  |
| regarding insurance for Scouting  |  |
| Contacting you with the above information will s  | support Scouting activities. All profits go straight back into Scouting to support the develop-<br>d the UK, including areas where young people do not currently have the opportunity to join. |
| Partners or Third Parties   |  |
| We may also have information, offers and opportions that the Association may partner with.          | tunities for Scout members and supporters from carefully selected third parties or organisa-   |
| $\ \square$ I am happy to receive information about third   | party or partner organisation offers and opportunities   |
|   | or personal details to any third party organisations without consent or as required by law.  In preferences online by editing your profile on Compass at any time.                             |
| Additional needs/Disabilities (please t   | cick those as necessary and provide details)   |
|   | Guidance   |
| ☐ Developmental ☐   | Developmental – ADHD/ADD, Autistic Spectrum Disorder, Dyslexia, Dyspraxia, Other   |
| ☐ Injury  | Injury – Body, Brain   |
| Learning  | Learning – Spina Bifida, Down's Syndrome, Other  |
| ☐ Medical   | Medical – Allergies, Arthritis, Asthma, Diabetes, Epilepsy, ME/Chronic Fatigue, Other  |
| ☐ Mental health   | Mental Health – Bipolar, Depression, Eating Disorder, self-harm, Other   |
| ☐ Progressive   | Progressive – Muscular Dystrophy, Other  |
| ☐ Sensory   | Sensory – Hearing, Vision, Other   |

| Role Applied for   | ☐ Member  |
|--|---|
| (Some roles have a minimum membership requirement)   | ☐ Associate Member  |
| Scout Group/District   | ☐ Non Member  |
|  |   |
| Qualifications and Skills (this information is not required to complete the  | e appointment process and can be completed online later)  |
| Please list the qualifications and skills that you are able to bring to Scouting.  |   |
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|  |   |
| Hobbies and Interests (this information is not required to complete the a  | ppointment process and can be completed online later)   |
| Please list any hobbies or interests that you may wish to share within Scouting.   |   |
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| <b>References</b> (not required for Scout Network and other specific roles; see POR  | in the appointments chapter)  |
| Please add details of two people to act as referees who are known to you and w   |   |
| have knowledge of your work or contact with young people, and should be able<br>At least one referee should have known you for at least five years and one of th | e to comment on your character and relationships with others.<br>The referees must not be from Scouting. Referees must not be |
| relatives. Examples of referees include your employer, college tutor etc.  |   |
| Name   |   |
| Relationship   |   |
| Email  |   |
| Address  |   |
|  |   |
|  |   |
| Postcode   |   |
| Phone Number   |   |
|  |   |
| Name   |   |
| Relationship   |   |
|  |   |
| Email Address  |   |
| Addiess  |   |
|  |   |
| Destanda   |   |
| Postcode   |   |
| Phone Number   |   |

## **Declarations**

## **Applicant Declaration**

Please note, by signing this form you will, as appropriate, accept, confirm and declare all the matters under this section. If you do not agree with any one of the items below, do not sign this form. For advice, please contact your line manager or the Scout Information Centre (0845 300 1818, 020 8433 7100 or info.centre@scouts.org.uk)

# 1. Acceptance of Scouting values and Association rules

By signing this application, I confirm that I:

- a) accept the values of Scouting as set out in the Purpose and Values (please see the publication, The Adventure Starts Here);
- b) have received a copy of Young People First: Safeguarding Code of good practice (known as the 'yellow card') and accept and understand that the aim of the Child Protection Policy is to safeguard the welfare of all Members by protecting them from neglect and from physical, sexual and emotional harm;
- c) am prepared to make the Scout Promise (where appropriate if you are unsure please contact your line manger or the Scout Information Centre);
- d) agree not to promote any beliefs, behaviours or practices that are not compatible with the values of Scouting;
- e) agree to abide by the policies and rules of The Scout Association
- f) accept that Scouting is a uniformed organisation
- g) accept the requirement to undertake the appropriate learning and/or training within the timescale as laid down by The Scout Association
- h) am subject to a check made against records at Headquarters and certain roles will be required to undertake a Criminal Record Disclosure check.

### 2. Data Protection

As a registered Data Controller, The Scout Association is committed to the Data Principles of the Data Protection Act 1998.

- By signing this application, I agree to The Scout Association during and beyond my Membership or involvement with the organisation:
- a) Retaining my personal data to facilitate any present or potential future involvement with Scouting;
- b) Retaining personal data regarding my religion, special needs/disabilities, ethnicity, medical information and/or commission of offences or alleged offences
- c) Carrying out checks into my suitability to carry out a role in Scouting, including obtaining references and a criminal record check (if relevant).

### 3. Trustee Declaration

Note: this declaration only applies to you if your role requires you to be a Charity Trustee. This includes:

- Chairmen, Secretaries and Treasurers of Executive Committees
- County Commissioners, County Scout Network Commissioners
- District Commissioners, District Explorer Scout Commissioners
- Group Scout Leaders , Assistant Group Scout Leaders
- Section Leaders, who opt to be on the Group Executive Committee (but not Assistant Section Leaders or Section Assistants)
- Nominated, Elected and Co-opted Members of Executive Committees

By signing this form I declare that I:

- a) have not been convicted at any time of an offence involving dishonesty or deception (please note, you do not have to declare any conviction here which is regarded as 'spent'); and
- b) am not an un-discharged bankrupt; and
- c) am not disqualified from being a Company Director; and
- d) have not failed to make payments under County Court Administration Orders; and

For England and Wales

e) have not at any time been removed by the Charity Commission or by the court in England or Wales from being a Trustee due to misconduct.

For Scotland

f) am not disqualified from acting as a Charity Trustee (see sections 69 and 70 of the Charities and Trustee Investment (Scotland) Act 2005)

| Date                              | Once you have completed this form, please pass it to your line manager. |  |
|-----------------------------------|---|--|
| Signature                         | Print Name  |  |
| Thave read and understood the App | Cant Decidration, Data Protection and Trustee Decidration               |  |

Should you require any support with the completion of this form, you can contact your leader, line manager or the Scout Information Centre on **020 8433 7100, 0845 300 1818** 

or by email info.centre@scouts.org.uk Scottish Headquarters on 01383 419073 or Northern Ireland Headquarters on 028 9049 2829