



Member Application Form & Data Protection Statement

Please return this completed form to:

Support With Confidence Team
East Sussex County Council Trading Standards
St Mary's House, 52 St Leonard's Road
Eastbourne, East Sussex, BN21 3UU

Enquiries

Please call 01323 463440 or email supportwithconfidence@eastsussex.gov.uk

Thank you for contacting us about becoming a member of our Support with Confidence scheme.

This form is available in pdf, or Rich Text format which can be completed using almost any word processing package. You will need to print and sign the completed form, and post it with copies of the additional documents requested according to the sections you have completed.

Where appropriate please simply mark an 'x' in the boxes provided.

If you have any questions about this form or the Support with Confidence scheme, please don't hesitate to contact us using the details above.

Please note - this form has been designed to capture information for a range of service providers. Please complete the sections that are relevant to you.

Buy With Confidence members - if you have already completed a Buy With Confidence application form or are an existing member, you do not need to submit duplicate information twice.

Data Protection

You can only become an approved member of the scheme, with your details listed on the East Sussex County Council website, after you provide all requested information and complete the full application process. We will make checks to verify the information that you provide.

- If you are a Personal Assistant** the following information will be displayed on our website/given to the public on request.
 - Your Membership Approval Number, telephone number and the town in which you are located
 - The date of your Enhanced Criminal Record check clearance
 - Your availability and hours of work (including where you want to work and if you are a car driver)
 - Your charges and employment status (as appropriate)
 - Any other information you provide regarding the service you wish to provide.
- If you are a business, charity or other organisation**, your full address and contact information will be displayed on our website/given to the public on request.

The remaining information will be held securely, in an electronic format, by East Sussex County Council for a period of five years from the date Approval ceases. The information that you provide will only be used for Support with Confidence purposes.

Your contact details

Your full name			
Business name if applicable			
Address and postcode			
Daytime telephone number		Mobile	
Email			
Have you ever lived or worked abroad? If so please specify			
What are your expectations of the Support With Confidence Scheme			
How did you hear of the scheme?			

Services provided - for Personal Assistants only

Personal Assistants (Self-Employed)		Medication		Transport	
Personal Assistants (Employed)		Shopping		Meal provision	
Personal Care		Social Engagement		Other services	

If other please specify:

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**Have you worked or are you currently working as a Personal Assistant?
If so please advise how long you have been doing this work.**

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Services provided - for businesses and other services

Type of business (ie sole trader / partnership / limited company)	
Registered name (if appropriate)	
Registered address	
Company number	
Main contact for the purposes of this application	
Website address	
Nature of business (ie what you do / your services)	
How long has your company / organisation been trading?	
Any additional business premises? If so please specify	
Are you a member of any trade associations? If so please specify	
Number of employees	
Do you use subcontractors?	
Does your business generate sales by cold calling? <i>Please note this practice is not permitted for Support With Confidence</i>	

Training - for Personal Assistants only

Have you undertaken training relevant to your profession?	Yes		No	
Have you previously undertaken Induction Training with a Registered Support Provider?	Yes		No	
Can you supply copies of certificates for training undertaken?	Yes		No	
Have you undertaken NVQ level training?	Yes		No	

<p>If you have answered Yes to any of the above please give details.</p> <p><i>Please use another sheet of paper if you need to.</i></p>	
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<p>For Personal Assistants only: if required, would you be willing to undertake a free 6 day Induction Training course, as provided by the Council?</p>	Yes		No	
<p>For other businesses: please indicate you are willing to undertake free training relevant to your service, as required?</p> <p><i>Please note that responding "No" to this question will mean that your application for approval will be refused.</i></p>	Yes		No	

Availability

Times of day - what time would you prefer to start and finish work?	Start		Finish	
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How many hours a week do you want to work?	
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How many days a week do you want to work?	
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Are you available to work on Saturday and Sunday?	Yes		No	
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Are you able to work during school holidays?	Yes		No	
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Which areas of the county do you wish to work in?	
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Use of vehicles

Do you drive a car? If Yes, please provide a copy of your driving licence.	Yes		No	
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If you use a vehicle for work/business, is your car insured for business use? Please provide a copy of the relevant insurance.	Yes		No	
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Have you or any of your staff any driving convictions? If Yes, please give all details below	Yes		No	
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<p>Driving convictions <i>What are they?</i> <i>Please give all information including date(s).</i></p>	
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Specialisation

Do you or your staff have any specialist skills or experience that you wish to use?		Yes		No	
If Yes please give details. <i>Please use another sheet of paper if you need to.</i>					

Your fees

It is acceptable for approximate charges to be entered here, however all fees and charges must be made clear to Clients, in writing, before service delivery begins

What hourly rate do you currently charge or anticipate earning?					£
Is this inclusive of mileage? If no, please specify whether you would charge extra for the mileage and the rate.	Yes		No		£
If your service does not charge an hourly rate, please provide an explanation below about your costs.	Yes		No		£
Additional information					

Employment - for Personal Assistants only

Do you undertake work as an employee or as a self employed Personal Assistant or both. (Please specify and use the area below to expand if you need to)		Yes		No	
If self employed, please provide your Unique Tax Reference Number					
Additional information					

General - for self employed Personal Assistants, businesses and other services

<p>Please specify what insurances you have in place e.g. Public Liability.</p>	
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<p>Do you have standard terms of business? If yes, please supply a copy.</p>	Yes		No	
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<p>Do you provide estimates/quotes, receipts or invoices? If yes, please provide a copy.</p>	Yes		No	
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Advertising your business

<p>Do you currently advertise your services/business?</p>	Yes		No	
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<p>If Yes, please specify where</p> <p><i>If you do, please supply copies of advertisements you use, or indicate where you advertise if you are not able to send copies.</i></p>	
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Other information

<p>If you wish to add any further information about yourself, please enter it here.</p> <p><i>Please use another sheet of paper if you need to.</i></p>	
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If a Personal Assistant, do you have any particular needs or medical conditions that Clients should know about?	Yes		No	
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If Yes, please specify	
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References - for Personal Assistants only

Please supply the names and addresses of two referees, one of whom should be your most recent employer and/or client if possible. However, if you have not been previously employed, give references from a professional member of your local community and a personal reference.

We will contact your referee's on receipt of your application.

Please note: Approval cannot be confirmed unless we are in receipt of 2 references, as deemed satisfactory by East Sussex County Council.

Reference 1	
Relationship to you	

Reference 2	
Relationship to you	

References - for businesses and other services

Please note that when we come to meet with you, we will ask to randomly select up to 10 customers so we can obtain a minimum of 5 references.

Please do not supply references in advance.

Declarations and background checks

Permission to work in the UK

Do you or your staff have any restrictions on your ability to work in the UK ?	Yes		No	
If yes, please describe				

Registration with the Independent Safeguarding Authority (ISA)

If you, or your staff, are employed to work with children or vulnerable adults you will need to apply for registration with the Independent Safeguarding Authority (ISA) in due course.

Once you are registered, ISA will give you a personal ISA Registration Number and you remain on the ISA database, even if you change employers. Details of how and when you should apply will be sent to you. Registration will be a legal requirement as from November 2010.

Are you willing to apply for registration with the Independent Safeguarding Authority? <i>Please note that responding "No" to this question will mean that your application for approval will be refused.</i>	Yes		No	
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Rehabilitation of Offenders Act 1974 and Exception Order 1975

If accepted onto the scheme, the work that you will be undertaking is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.

This means you cannot withhold information about any conviction. All information given will be verified against a returned CRB check. The term "conviction" relates to a finding of guilt following a hearing in a court of law, including Courts Martial.

Prospective employees for jobs exempt from the Rehabilitation of Offenders Act working with children or vulnerable adults will also be asked to declare official warnings, reprimands, registration as a sex offender, cautions, bind-overs and other relevant matters.

If you are approved, not disclosing such convictions could result in us taking you off of the Approved list.

Any information given will be completely confidential and will be considered only in relation to an applicant for a role to which the Order applies.

Have you or relevant staff ever been subject to any Police warnings, reprimands, cautions, convictions, bindovers?	Yes		No	
Or are any of these pending?	Yes		No	

<p>If Yes, what are they? Please give all information including date(s). A Risk Assessment will then be carried out.</p> <p><i>Failure to give this information will mean that your application will be refused.</i></p>	
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Enhanced Criminal Records checks

<p>Are you and your relevant staff willing to have an Enhanced Criminal Records check carried out?</p> <p>(This will be arranged by East Sussex County Council.)</p> <p><i>Please note that responding “No” to this question will mean that your application for approval will be refused.</i></p>	Yes		No	
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Please note that if you or relevant staff have been convicted of any of the following offences your application will not be approved:

- Any offence against children, young people or vulnerable adults
- Murder
- Offences involving serious violence or threats of violence
- Offences involving serious theft or fraud where duties allow access to substantial financial resources
- Sexual offences of any nature
- Serious burglary or arson, where duties involve substantial responsibility for security of buildings or equipment
- If you have been placed onto the following lists
 1. Protection of Vulnerable Adults List (POVA)
 2. Protection of Children’s Act List (POCA)
 3. Section 142 of the Education Act (List 99)

For all other offences, appointment is subject to a risk assessment

Your signature and agreement

Terms & Conditions of Approval

On being accepted as a member of Support with Confidence, you agree to deliver services in accordance with the Terms and Conditions as specified in the Code of Conduct.

Quality monitoring will take place to ensure Client safety & satisfaction, and a random check may be carried out by the Council on any services which you deliver. The information given in this form will be reviewed and updated periodically.

If complaints are received by the Council, then your name may be temporarily removed from the Scheme whilst the complaint is being investigated by the Council and may be permanently deleted from it if the content of those complaints are proved to be substantiated.

Please confirm your agreement to these terms and conditions.

- For an Enhanced CRB check to be carried out for you and relevant staff
- Willingness to apply for ISA registration for you and relevant staff
- Commitment to comply with the above and Code of Conduct
- Commitment to training for you and relevant staff
- Willingness for your information to be listed on the East Sussex County Council website. This will include the date your CRB check was carried out.

As part of the approval process, checks will be made on the applicants history in relation to any of the following – as appropriate.

- County Court Judgements
- Companies House (if you are registered)
- London Gazette Check (for Bankruptcy information)
- Disqualified Director Check
- Trading Standards own database
- Appropriate licences
- Membership of any acclaimed trade associations or professional bodies.

Please confirm your agreement to these terms and conditions. <i>Please note that responding "No" to this question will mean that your application for approval will be refused.</i>	Yes		No	
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Signature		Date	
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Please also print name	
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Thank you for taking the time to complete this application.

Your application will be processed as soon as possible and we will be in touch to arrange your interview.



**Support with
Confidence**
EAST SUSSEX COUNTY COUNCIL