

## SOCIAL CARE CHECK

<b>Section 1 To the Applicant/Appointee</b>
<p>Current Department of Health Guidelines recommend that Bury Council check with Social Care on the background of certain persons who will have access to children.</p> <p>Please complete Section 2 to enable this check to be done.</p> <p><b>Post: Chaperone/Tutor for Children in Entertainment</b></p>

<b>Section 2 For completion by Applicant/Appointee to post in Section 1</b>			
Block Capitals Please			
First Names:		Surname:	
Date of Birth:		Place of Birth:	
Previous or other names (e.g. maiden name)			
Present Address:			
Post Code:			
Length of time at this address:			
From (date):			
Telephone Number:		Mobile Number:	
Please give previous addresses, in full, used within the last 5 years (state full postal address inc. post code)			
1.	Date from:	Date to:	
2.	Date from:	Date to:	
3.	Date from:	Date to:	
Continue overleaf if necessary			
In connection with the application specified in Section 1, I will have substantial access to children and agree to enquiries being made in confidence from Social Care. (This information is being used for the above purpose only).			
Signed:		Date:	
<b>Section 3 To Social Care</b>			
Can you please check the above person on Liquid Logic/Protocol, enter your findings in the space below and return this form to the JE&E Licensing Officer, School Attendance Team, 3 Knowsley Place, Duke Street, Bury BL9 OEJ or email to: <a href="mailto:child.licensing@bury.gov.uk">child.licensing@bury.gov.uk</a>			
Signed: On behalf of Social Care		Date:	