



Contact Information

Name _____

Address _____

Town _____

County _____ Postcode _____

Home Phone _____ Work Phone _____

Email Address _____

Date of Birth _____ Age _____

Church Information

Church Name _____

Leader's Name _____

Address _____

Town _____

County _____ Postcode _____

Home Phone _____ Work Phone _____

Email Address _____

Church Leader's Declaration

I have seen the publicity information for 'Reach the Vale' and support / do not support* this application.

I consider / do not consider* this applicant suitable for such a mission.

Signed _____

Date _____

**Church Leader- please delete as appropriate – if you wish to send further information, please do so under spate cover to the address below.*

What you are signing up for (subject to alteration)

Reach Out 2012 – Saturday 30th June to Sunday 8th July 2012

A. Full Week Residential full board (Saturday to Sunday inclusive) – Cost £110

You will arrive on Saturday afternoon.

Bed, Breakfast, packed lunch and evening meals will be provided by your host church.

Accommodation will be in the homes of church members for three nights and in Hebron Hall Christian Centre for five nights.

B. Full Week Non-Residential (Saturday to Sunday inclusive) – Cost £40

The cost includes training, packed lunch and evening meals (Monday – Friday). You will need to provide your own accommodation.

All day Monday and Tuesday – Friday mornings you will be given training in basic evangelism skills. Each lunch time, you and the team to which you will have been assigned will be involved in ‘Open Air Evangelism’. Teams will then join their host churches and be involved in a variety of outreach opportunities.

On the final Sunday you and your team will take part in the Sunday Service at your host church before leaving after lunch.

Experience

How long have you been a Christian? _____ Years

Please summarise the types of evangelistic ministry you been involved in, if any.

Special Skills

Please summarise any special skills you have acquired (e.g. sketchboard, music, drama, mime, dance, conjouring etc.)

Dietary Requirements

If you have any special dietary requirements, please give details _____

Person to Notify in Case of Emergency

Name _____

Address _____

Town _____

County _____ Postcode _____

Home Phone _____ Work Phone _____

Email Address _____

Applicants declaration

Have you ever been convicted of a sexual offence or any offence involving children or young people? YES / NO

Have you ever been convicted of any criminal offence? YES / NO

If YES, please state the nature and date(s) of the offence(s), continuing on a separate sheet if necessary

Signed _____ Date _____

Options

Please tick the training option that you are applying for (*see details on page 2*)

A. Full week Residential Full Board

B. Full week Non-Residential

Please send the completed form to:

P. Bennett O.A.C

PO Box 1248

Enfield

Middlesex

EN1 9UL

With your cheque for the appropriate amount, made payable to 'OAC Ministries'.

For further information:

Write - to the address above

Email - info.gb.oaci.org

Phone - 020 8360 5788

Web - www.oacgb.org.uk

OAC is a registered charity no 295432

OAC Ministries Self Declaration Form

STRICTLY CONFIDENTIAL

During your time on the Mission you may be required to undertake work with children, young people, and vulnerable adults. We would therefore ask you to complete the following self declaration. Please note that only relevant convictions and other information will be taken into account so disclosure need not necessarily be a bar to obtaining this position. As an organisation we undertake to meet the requirements of the Data Protection Act 1998 and all other relevant legislation. All applicants are asked to complete this form and return it in a separate sealed envelope to:

Dawn Getley (OAC Child Protection Coordinator), 23 Periwinkle Drive, Plymouth PL7 2WR

Have you ever been charged with, cautioned or convicted in relation to any criminal offence; or are you at present the subject of a criminal investigations/pending prosecution?

Yes No (please tick)

If yes, please give details including the nature of the offences and the dates. Please give details of the court(s) where your conviction (s) were heard, the type of offence and sentence(s) received. Could you also give details of the reasons and circumstances that led to the offence(s). Continue on a separate sheet if necessary.

POLICE INVESTIGATIONS

This should include relevant police non-conviction information. Have you ever been the subject of a police investigation that didn't lead to a criminal conviction?

Yes No (please tick)

If yes, please give details below, including the date of the investigation, the Police Force involved, details of the investigation and the reason for this, and disposal(s) if known.

To your knowledge have you ever had any allegation made against you, which has been reported to, and investigated by, Social Services/Social Work Department (Children's or Adult Social Care)?

Yes No (please tick)

If yes, please provide details, we will need to discuss this with you.

Has there ever been any cause for concern regarding your conduct with children, young people, vulnerable adults? Please include any disciplinary action taken by an employer in relation to your behaviour with adults.

Yes No (please tick)

If yes, please give details.

DECLARATION

To help us ensure that we are complying with all relevant safeguarding legislation, please read the accompanying notes and complete the following declaration.

I (full name) _____ of (address) _____

Confirm that I am not barred from working with children/vulnerable adults from engaging in regulated or controlled activity.

Signed: _____ Date: _____