



SCOTTISH YOUTH FOOTBALL ASSOCIATION
HAMPDEN PARK GLASGOW G42 9BF
TEL: 0141 620 4590 FAX: 0141 620 4591
SUPPORTED BY DUNFERMLINE BUILDING SOCIETY

**Application form for a Volunteer Official
seeking membership of an SYFA member club.**

All applicants for posts that involve contact with children and young people are asked to complete an application form.

SECTION A: Your personal details

Title:
First name:
Surname:
Any previous names by which you have been known:
Address:
Post code:
How long have you lived at the above address?
If less than 12 months, please give your previous address? Previous address: Post code: How long did you live there?

SECTION B: Your present or most recent voluntary work

Name of organisation:
Address of organisation:
Summary of role and responsibilities:
Please give reasons for leaving

SECTION C: Please give details of any previous experience you may have of looking after and/or working with youth football players.

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SECTION D: Please give details of any relevant qualifications, training and/or personal qualities which you feel equip you to work with youth football players. If necessary, please continue on a separate sheet.

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SECTION E: References – please give the name and contact details of two suitable referees. At least one should have knowledge of any previous work you may have undertaken with children and young people.

Name:	Name:
Organisation: (where applicable)	Organisation: (where applicable)
Address:	Address:
Telephone:	Telephone:
In what capacity do you know this person (friend, colleague, etc.)?	In what capacity do you know this person (friend, colleague, etc.)?

Section F: Disclosure procedures

This post will require completion of an SYFA Self-declaration Form and a Disclosure check at **Enhanced level**. Disclosure checks will only be requested for those applicants that we wish to appoint.

(i) SYFA Self-Declaration Form: Please confirm that, you understand and agree to complete the SYFA Self-declaration form.

Please tick:

(ii) Disclosure check: Please confirm that, you understand and agree to a Disclosure check should we wish to appoint you to a post within the SYFA.

Please tick:

Section G: Declaration

I confirm that the information I have given in this form is accurate and truthful.

Signed _____ **Date** _____

Thank you for completing this application form. Please return it to the name and address given below:

The information you give us in this form will be treated in the strictest confidence.