

WEXFORD MARINEWATCH

Volunteer Application Form

PRIVATE & CONFIDENTIAL

Notes prior to completion:

Please complete all sections of this application, as well as the Declaration and Garda Vetting Form at the end. Failure to do so, may result in your application being refused. Due to the nature of our work we can only accept applications from those aged 21 AND OVER.

A COLOUR PASSPORT PHOTO MUST ACCOMPANY YOUR APPLICATION.

*Please complete this form in BLOCK CAPITALS

PERSONAL DETAILS

Full Name:	
Postal Address:	
Date of Birth (DD/MM/YYYY)	_
Age:	
Telephone (Home):	_
(Mobile):	
Email Address:	_ (Compulsory)
Emergency Contact: Name:	_ Phone:
(E.g: in case you became ill on duty).	
Do you hold a current Irish full driving licence? (Pleas	se mark 'X');
YES NO(If 'yes', please enclose a copy	with this application)
How long have you held this licence for?	(Years)
Category of Licence held:	(C1/D1/E Etc.)

DUTY NIGHTS

Please mark 'X' which Patrol night(s) you are available for Volunteering:

(Weekdays: 8.00pm - 12.00am) *Times are only approximate and vary from week to week. *Generally Volunteers are not asked to do more than ONE night a month.

MON TUES	WED THURS
Fridays:	9:30pm - 03.00am
Saturdays:	9:30pm - 03:00am
Sunday/ Bank Holidays;	9:30pm - 03:00am
Patrols include one rest-break, with complimentary refresh	ments which are kindly sponsored by local Hotels.
Fundraising ONLY (No patro	ols)

Please mark 'X' to indicate the <u>frequency</u> you feel you would be able to Volunteer; (we understand this may change due to people's personal circumstances etc.):

FREQUENCY	"X"
Every Week	
Every Fortnight	
Once a Month	
Once a Month	
Once every two Months	

^{*}Volunteers will also be required to participate in Training courses on various dates outside their patrol availability.

Garda Vetting

All applicants are first submitted for Garda screening before their application with Wexford MarineWatch is considered any further. The National Vetting Bureau (Children and Vulnerable Persons Bill 2012) makes it mandatory for persons in contact with children or vulnerable adults to be vetted by the Gardaí. The Garda Central Vetting Unit deals with our requests to vet prospective Candidates and we have no control over the speed or results of this screening.

Disclosure of Details

When a prospective volunteer is screened by the Gardaí, the details of all convictions and prosecutions (if any) are disclosed to the authorised Liaison person within Marinewatch. These details will include all completed prosecutions whether or not they were successful and will also include any pending prosecutions. Failure to complete or disclose all details in the Garda Vetting application form at this point will result in dismissal at a later date. We cannot disclose or discuss any details about unsuccessful applications, such as why they failed, or if it was due to Garda vetting etc. due to Data Protection Laws – so please do not ask.

MEDICAL DISCLOSURE

Due to the physical nature of our work and some aspects of training, an acceptable normal level of fitness is required, as our Patrols can involve a considerable amount of walking (at a leisurely pace). Wexford MarineWatch and/or their committee will not be held liable for any aggravation or recurrence of injuries/illnesses which occur during or after activities/training and which were not disclosed at this point of the application process.

(Please mark 'X' Below);

1.) Have you had any experience of Suicide/Self-harm in your life? (Friend/Family member/Colleague/unrelated)		
(If Yes, please outline;)		
2.) Are you presently receiving any treatment or medication? (If Yes, please outline;)	YES	NO
3.) Do you suffer from any current Physical or Mental conditions?	YES	NO
(If Yes, please outline;)		
4.) Have you experienced any signs or symptoms of <u>any</u> Medical Problems		
problems) in the last two years regardless of whether any Healthcare P	rofessional h	nad been
consulted or not?	YES	NO
(If Yes, please outline;)		
5.) Do you require or expect to require any review, investigation or treat	ment for any	current or past
medical conditions?	YES	NO
(If Yes, please outline;)		

If you have answered yes to any of the above, <u>further</u> details may be required at a later date if your application is successful. In certain cases, we may require a letter from your Doctor.

ADDITIONAL INFORMATION

"ABOUT YOU". (Compulsory)			
In a few lines, tell us what makes you wish to join	Wexford Marin	neWatch;	
			
What qualities do you feel you can bring to our tea	am?		
Do you currently know any existing Volunteers?	YES	NO	
(If YES, please state <u>their Name</u> and indicate your rela Work Colleague etc.)	ationship to this p	person – e.g	: Relation, Friend
Would this Volunteer be able to give you a 'Chara			
What other qualifications/experience (if any) do yo	ou have that ma	ay be of bei	nefit?
(Please note any 'Formal' qualifications such as Fi	•	•	•
SafeTALK etc., MUST be backed up by a copy of the	ie reievant Ceri	uncate, incl	uaing

expiry date - and submitted once your application is successful).

OTHER INFORMATION

Please note that as a volunteer, you will also be required to participate and/or attend at some fundraising events throughout the year.

If you are incapacitated or not able to participate in Patrols, we may still welcome your services in a Fundraising capacity from time to time. If this is your preferred option, please state this clearly at the end of the form. (Garda Vetting & interview will still be required).

Applicants are subject to a probationary period for 12 months and are subject to ongoing appraisals. Confidentiality must be strictly adhered to at all times. Crewmembers are asked to be cautious about passing ANY information via Social media such as Facebook or Twitter – the organisation has an official Facebook page and Website where people should be referred to for more information. The organisation also has a PRO officer who is trained to deal with queries by the Media etc. and any enquiries should be channelled through them only.

This Form CANNOT be returned electronically – please return it by post to the address below;

The organisation has a 'Private' Facebook group, which all successful candidates are added to after their first patrol. This is used to keep volunteers updated with the latest information, events, & Rosters. Please ask your Supervisor for more details.

Rosters are also sent Monthly via email – so ensure you provide your latest email address and check it on a regular basis.

Each successful candidate will receive a Volunteer handbook and a Confidentiality agreement to sign during their induction.

All completed application forms should be posted to:

(WITH PASSPORT PHOTO & COPY OF DRIVERS LICENCE)

The Recruitment Manager
Wexford MarineWatch,
P.O Box 81, Whitemill Ind. Estate,
Wexford.

APPLICANT DECLARATION

"I do hereby declare to Wexford Marinewatch, that I do not possess any Criminal record and have not been charged with any criminal offence in Ireland or abroad - nor or have any cases pending. I understand and accept that any such charge or offence(s) uncovered at a later date will result in refusal of my application and/or subsequent dismissal by the organisation.

Upon acceptance, I hereby agree to be bound by all Protocols, Rules & Regulations, codes of conduct, Confidentiality Agreements, Health & Safety Procedures, and Standard Operating Procedures as outlined by the organisation and follow any guidelines or additional instructions they may issue for time to time.

I will make every effort to uphold the good name of the organisation and will not do anything to bring the organisation into disrepute or to put the safety of any other volunteer at risk. I further agree to attend any training courses requested of me within a reasonable period and make every possible effort to attend any Patrols, meetings or exercises that are scheduled by the organisation.

I will commit to make myself available to the organisation for Patrols in accordance with the times/dates specified in my application and also try to assist when additional people are needed from time to time.

I finally confirm that the information given by me in this application is complete and accurate and I have attached a recent Passport Photo & Drivers Licence (where applicable)".

Additional Notes you wish to bring to the attention of Wexford MarineWatch (if any	'):
Date:	
NAME:(PRINT).	
SIGNED:	

From time to time, we will interview certain candidates to assess suitability – and reserve the right to do so.		
OFFICE USE ONLY	Interviewer 1:	
Interview:	Interviewer 2:	
Comments:		

GARDA VETTING FORM BELOW MUST ALSO BE COMPLETED.



An Garda Síochána Use Only

Reference No.:

An Garda Síochána

GARDA VETTING APPLICATION FORM

NOTE TO APPLICANT

- ➤ The Enquiry Form must be completed in full using BLOCK CAPITALS (Please state N/A if details are not applicable)
- Writing must be clear and legible
- > Return the completed form to WEXFORD MARINEWATCH.
- > Do not send this form to The Garda Central Vetting Unit or to any Garda Station

To be completed by the Applicant

SURNAME:	PREVIOUS NAME (if any):
FORENAME:	ALIAS:
DATE OF BIRTH:(dd/mm/yy)	PLACE/CITY OF ORIGIN:
HAVE YOU EVER CHANGED YOUR NAME?	Yes No
IF YES PLEASE STATE FORMER NAME:	

Please state all addresses from year of birth to present date;							
House	Street	Town	County	Post	Country	Year	Year
No.				Code		From	То

Please Continue Overleaf

Have you ever been convicted of an offence in the Republic of Ireland or elsewhere?					
No Ye	s Please p	provide details;			
DATE	COURT	OFFENCE	COURT OUTCOME		
DECLARATION OF APPLICANT					
I, the undersigned who has applied for a position as a Volunteer, hereby authorise An Garda Síochána to furnish to Wexford Warinewatch a statement that there are no convictions recorded against me in the Republic of Ireland or elsewhere, <u>or</u> a statement of all convictions and / or prosecutions, successful or not, pending or completed, in the State or elsewhere as the case may be.					
Signature of App Please Print Also	plicant: o: (Date:			

To be completed by Wexford Marinewatch only	
Authorised Signatory: (Wexford Marinewatch) PLEASE PRINT ALSO ()	
Registration Number: Date:	_
To be completed by the Garda Central Vetting Unit	
According to Garda records there are no previous convictions recorded against the ab	ove named applicant:
OR the attached convictions appear on Garda Records:	
OR the attached prosecutions are pending:	
NOTE: Checks were carried out by this office based on the information supplied. The convictions supplied <u>may</u> apply to the subject of your enquiry.	ed.
Please verify information disclosed with the applicant.	STAMP:
Signed: Member I/C	