



Cambridgeshire and Peterborough - Independent Custody Visiting Scheme

Application Form

Before completing this document you should look to read the accompanying information sheet.

If you have any further questions or if you have any difficulties completing this form please contact the Office of the Police and Crime Commissioner by emailing cambs-pcc@cambs.pnn.police.uk and asking to speak to the Independent Custody Visiting Scheme Manager.

About you	
Title:	Full Name:
Date of Birth:	
Home Address:	
Postcode:	
Main contact number:	
Email:	
Have you lived in the UK continuously for the last 3 years?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you live, work or study in Cambridgeshire or Peterborough?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

About volunteering

Please give a brief overview of why do you want to volunteer as an Independent Custody Visitor (ICV) and what would you like to gain from the experience? **(max. 200 words)**

Have you ever applied, or worked with the Police in either a staffed role or as a volunteer?

Yes

No

If yes, please give details:

Specific Information

Do you have any health or support needs that would need to be considered in relation to carrying out physical visits to police stations?

Do you have any health or support needs that would need to be considered in relation to attending online / telephone meetings?

References

Please provide the name and contact details of two people who would be prepared to provide a character reference. Your referees must not be related to you or your partner and must have known you for at least one year. One of your referees must know you in a professional capacity and ideally should be from your present / most recent employer / education body.

Referee 1

Full Name:

Phone number:

Email address:

How do you know this person?

Referee 2

Full name:

Phone number:

Email address:

How do you know this person?

Disclosure and Declaration

Because of the sensitive nature of custody visiting, applicants must be willing to undergo relevant security checks in line with Cambridgeshire Constabulary's vetting policy. This will involve disclosing details of any criminal record or involvement with the criminal justice system.

A criminal record would not automatically stop you becoming an independent Custody Visitor, as each individual is considered by the Vetting Unit on case-by-case basis.

By completing and submitting this form you are acknowledging that you understand you will be required to undergo the relevant vetting process at the relevant stage in the process.

I am applying to become a volunteer with the Office of the Police and Crime Commissioner. I hereby declare that the information I have given in this application is true to the best of my knowledge and belief. I understand that if I am accepted as an Independent Custody Visitor, I must inform the Volunteer Co-ordinator immediately of any changes to my personal circumstances.

Signature:

Date:

Thank you for your interest.
Please save your completed form and email it to
cambs-pcc@cambs.pnn.police.uk

Equal Opportunities Monitoring Form

The Office of the Police and Crime Commissioner is committed to a policy of equal opportunity for all. We would therefore be grateful if you would provide the following information which will be used solely for monitoring purposes. This page will be detached from the application form and will not be used in the selection process.

Gender

- I am male I am female Prefer not to say

I would describe my ethnic origin as...

- | | | |
|---|--|--|
| <input type="checkbox"/> Asian – Bangladeshi | <input type="checkbox"/> Black – Caribbean | <input type="checkbox"/> Mixed – Turkish and Turkish Cypriot |
| <input type="checkbox"/> Asian – Indian | <input type="checkbox"/> Any other Black background | <input type="checkbox"/> Any other Mixed background |
| <input type="checkbox"/> Asian – Pakistani | <input type="checkbox"/> Chinese | <input type="checkbox"/> White – British |
| <input type="checkbox"/> Any other Asian background | <input type="checkbox"/> Greek or Greek Cypriot | <input type="checkbox"/> White – Irish |
| <input type="checkbox"/> Black – African | <input type="checkbox"/> Mixed – White and Asian | <input type="checkbox"/> Any other White background |
| <input type="checkbox"/> Black – Asian | <input type="checkbox"/> Mixed – White and Black African | <input type="checkbox"/> Any other group not specified |
| <input type="checkbox"/> Black – British | <input type="checkbox"/> Mixed – White and Black Caribbean | <input type="checkbox"/> Prefer not to say |

I am aged...

- Under 18 18 – 24 25 – 44 45 – 64 Over 65

Do you consider yourself to have a disability?

- Yes No Prefer not to say

I would describe my employment status as....

- | | | |
|---|------------------------------------|---|
| <input type="checkbox"/> Full time | <input type="checkbox"/> Part time | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Student | <input type="checkbox"/> Temporary | <input type="checkbox"/> Currently seeking employment |
| <input type="checkbox"/> Not currently seeking employment | <input type="checkbox"/> Other | <input type="checkbox"/> Prefer not to say |

I would describe my religious belief / faith as...

- | | | |
|------------------------------------|---------------------------------|--|
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> Jewish | <input type="checkbox"/> No religion |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Muslim | <input type="checkbox"/> Other |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Sikh | <input type="checkbox"/> Prefer not to say |

I would describe my sexual orientation as...

- | | |
|--|--|
| <input type="checkbox"/> Bisexual | <input type="checkbox"/> Heterosexual |
| <input type="checkbox"/> Gay / Lesbian | <input type="checkbox"/> Prefer not to say |

Where did you hear about us?

- Newspaper / Magazine – please state which _____
- Leaflet / poster – please state where you saw it _____
- Online – please state which website _____
- Friend / relation _____
- Other – please state _____