



CHILTERN RANGERS WORK EXPERIENCE PROFILE – UNDER 18

REFERRAL AGENCY, PARENT OR ESTABLISHMENT DETAILS

Establishment Name:

.....

Contact Name or Parent/Guardian Name:

.....

Address:

.....

.....

Telephone Number:

Mobile Number:

.....

Email:

.....

Photograph/Video Consent:

We would be grateful if you would fill tick this box to give us permission to take photos of the student/young person and use these in our printed and online publicity

Chiltern Rangers use the images resulting from the photography/video filming, and any reproductions or adaptations of the images for fundraising, publicity or other purposes to help achieve our aims. This might include (but is not limited to), the right to use them in our printed and online publicity, social media, press releases and funding applications.

You can opt out of receiving communication, change the method of communication or remove your consent for photography/videos at any time by writing to us at the address below, emailing us at info@chilternrangers.co.uk or phoning us on 01494 474486

Signed:

Date:

Print name:

STUDENT'S DETAILS

Name:

.....

Date of Birth:

Age:

.....

Address:

.....

.....

tel: 01494 474486

info@chilternrangers.co.uk

www.chilternrangers.co.uk



@Chiltern Rangers



Chiltern Rangers CIC



Chiltern Rangers

Registered Office: Kingsmead Depot, 60 Fennels Road, High Wycombe, Buckinghamshire HP11 1SL



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Home Tel. Number:Mobile Number:

Email:

Emergency Contact name:

Relationship to Student:

Emergency Telephone Number:

Dates that you would like student to gain experience with Chiltern Rangers:

.....

To ensure your safety please tick below if you suffer from any of the following medical conditions:

<ul style="list-style-type: none"> Allergies (please state) _____ 	<ul style="list-style-type: none"> Hearing problems
<ul style="list-style-type: none"> Asthma 	<ul style="list-style-type: none"> Learning Difficulties
<ul style="list-style-type: none"> Diabetes 	<ul style="list-style-type: none"> Mental health
<ul style="list-style-type: none"> Depression 	<ul style="list-style-type: none"> Physical disabilities
<ul style="list-style-type: none"> Anxiety 	<ul style="list-style-type: none"> Sight problems
<ul style="list-style-type: none"> Epilepsy 	<ul style="list-style-type: none"> Other

Are there any Risk Management, Health & Safety or Medical Issues we need to know about?

Does the student have a statement of support or receive regular learning support?

Any other information that we should know about?

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DATA PROTECTION

We will only use personal information you supply to us for the reason that you provided it for. We will only hold your information for as long as necessary to fulfil that purpose or for legal reasons. We will not pass your information to any other parties unless you give us consent to do so. All employees and contractors who have access to your personal data or are associated with the handling of that data are obliged to respect your confidentiality.

We would like to send you relevant information to keep you informed of Chiltern Rangers activities that may be of interest to you. To comply with the new General Data Protection 25th May 2018 we need to have your consent for us to communicate with you.

The Newsletter and information on the majority of the topics below are only sent out by email therefore if you wish to receive this information please ensure you give us your email address and tick the email box.

If you would like us to communicate information on any of the following topics please tick the relevant boxes on the right:

Quarterly Newsletter	
Conservation Volunteering (save the planet!)	
Youth & Family Projects/Events	
River Projects & Events	
Office/Admin Volunteering	
Corporate Be a Ranger Days	
Everything!	

Please select which methods of communication you are happy for us to use:

Email - work	
Email - home	
Telephone - work	
Telephone - mobile	
Telephone - home	

tel: 01494 474486



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