

Department of Health

DAY CARE CENTRE STUDENT/VOLUNTEER APPLICATION FORM (2024)

SECTION A: DOCUMENTATION REQUIREMENTS

- Change of Information Form and Application Form must be submitted immediately (within 24 hours).
- All personnel documents must be maintained on staff files at the Day Care Centre and updated according to timelines provided below.
- Students and Volunteers must be under direct supervision of qualified staff.

This form must be completed for students or volunteers working directly with children on a part time or full time basis.				
Students/Volunteers		Change of Information Form		
15-17 yrs – must have	2.	Application Form (Signed by the Personnel)		
the following on file.	3.	Valid Photo ID		
	4.	Two Reference Questionnaires		
	4			
	-	Change of Information Form		
Students/Volunteers	2.	Application Form (Signed by the Personnel)		
18yrs+	3.	Valid Photo ID		
*If volunteers are being	4.	Two Reference Questionnaires		
included in Child to Staff	5.	Criminal Background Check – Bermuda Police Service or Magistrate		
Ratio's all documents are		Court (Issued within the last 2 years)**		
required before they	6.	Medical Certificate for Child Care Providers (Completed by your doctor		
begin at the centre.		and issued in the last 5 years)**		
	7.	Department of Child and Family Services Background Check (Issued in		
		last 2 years)**		
	8.	SCARS Certificate (Issued in the last 3 years)		
	9.	CPR/First Aid (Issued in the last 2 years)		

Section B: Applicant Information				
Name of Applicant:	D.O.B (d/m/yr):			
Day Care Centre:	i			
Position Seeking:	Student Volunteer			
Home Address:				
Parish:	Postal Code:			
Telephone:	Cell Phone:			
Email:				
Citizenship (Required) for those over 18 years	Bermudian Non-Bermudian spouse of a Bermudian Permanent Resident Certificate (PRC) holder			
	Non-Bermudian – Work permit number			

I. Have you had any form of investigation or disciplinary action by the Department of Child and Family Services or any health or social services related agency that prevents you from working with children in Bermuda or overseas?	Yes	No
Explanation:		
2. Do you have a mental or physical condition and/or drug or alcohol use which could interfere with your current ability to work in child care settings?	Yes	No
Explanation:		

Section D: Declaration Statement – (check each box after reading and sign below)					
By my signature:					
 I agree the information in this application and the information in any required or following documentation is true and accurate to the best of my knowledge. I understand that false statements may result in the removal from the Day Care Centre. I understand my application to be a volunteer a day care centre, if approved, may be suspended or revoked at any time there is significant concern, evidence, or allegation regarding fraudulent activities, abuse or neglect. I agree to notify the Child Care Regulation Programme of any changes to the information provided in this registration form. I agree for Child Care Regulation Programme and/or MOH to contact relevant persons (including but not limited to regulatory and government entities) to verify the information provided in this application. 					
I agree that I will adhere to the Children Act 1998, Day Care Centre Regulations 1999, and Child Care Standards 2018.					
I,, have knowledge of my responsibility to report known or suspected child abuse in compliance with Part III of the Children Act 1998.					
I certify to the best of my knowledge that the information contained in this application is true and factual. <i>PATI disclaimer:</i> This correspondence and any response thereof is subject to public disclosure under the Public Access to Information Act 2010. Most exempt records may be disclosed if it is in the public interest (s.21). Personal information, such as names and personal details of service users, patients, complaints, children and vulnerable adults, is exempt from disclosure (s.23). Information of people receiving discretionary benefit such as a licence is not personal information and can be disclosed (s.24 (1)). Commercial information and information received in confidence may be disclosed if it is in the public interest (s.25&s. 26).					
Printed Name of Applicant					
Signature of Applicant					
Date					
INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED					
Completed applications are emailed to <u>childcare@gov.bm</u> or mailed/delivered to: Child Care Regulation Programme, Department of Health, Ground floor 25 Church St. Hamilton, HM12					