

Independent Custody Visitor Application Form

You may complete this form by hand or electronically. If you submit it electronically, you will be asked to sign the declaration on page 4 if you are invited to interview.

Surname:		Title:
Forenames (in full):		
Any other names by which you have been known:		
Date of birth:		Place of birth:
National Insurance Number:		Nationality:
Contact telephone numbers:-	Home:	
	Work:	
	Mobile:	
Do you have access to a computer to send and receive emails in relation to this role?		Yes / No
email address:		
Permanent address:		
How long have you lived at this address?		
If fewer than 5 years at current address, please give details of former address:		
Postcode:		
Are you disabled or do you have any medical condition/s which may affect your ability to carry out the duties of an Independent Custody Visitor?		
Yes/No		

If yes, please give details. This will not necessarily affect your application.

All reasonable adjustments as defined in the Equality Act 2010 will be made to accommodate those with a disability who are considered suitable candidates. However it must be recognised that custody is a dynamic and potentially dangerous environment therefore applicants are asked to consider their own safety and suitability for the role.

Do you have a UK driving licence and access to a car to enable you to conduct your visits?	Yes / No
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Do you have access to public transport to enable you to conduct your visits?	Yes / No
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Are you employed, retired or other? Please state here:

Name and address of employer:

Are you currently a police officer or serving in the Special Constabulary?

Yes/No

Are you currently a magistrate?

Yes/No

Do you have any family currently serving with Hampshire Constabulary?

Yes/No

Have you done any other voluntary work? Yes/No

If Yes – what was it and how long did you do it for?

(continue on a separate sheet if necessary)

Have you even been an Independent Custody Visitor before? – If yes, please give details

Why do you wish to be an Independent Custody visitor?

(continue on a separate sheet if necessary)

Having read the supporting information about the Scheme, what skills, experience and qualities do you feel you could bring to this role and the Scheme in general?

(continue on a separate sheet if necessary)

How did you learn about Independent Custody Visiting?

Have you ever been convicted of any offence punishable with imprisonment within the last five years, or have any criminal convictions?

Yes/No

If yes, please give details. The completion of this question and provision of this information is a requirement in all applications but may not necessarily affect your application. Offences covered by the Rehabilitation of Offenders Act 1974 if spent need not be listed.

NB Information provided under this heading will not necessarily disqualify an individual from becoming an Independent Custody Visitor

(continue on a separate sheet if necessary)

Please give details of two referees not related to you who have agreed to support your application:

**Name:
Address:**

**Name:
Address:**

Postcode:

Postcode:

Email address:

Email Address:

Phone Number:

Phone Number:

Occupation:

Occupation:

Declaration

I have read the information supplied to me concerning the duties and responsibilities of an Independent Custody Visitor.

I give the Commissioner's office authority to carry out appropriate police vetting and to approach my referees in relation to this appointment.

I agree to maintain confidentiality at all times in relation to this appointment and in line with the Scheme Guidelines and Codes of Practice.

I declare that the information I have provided is accurate to the best of my knowledge and belief.

Signed

Date

Please return your completed form to:

**ICV Scheme Administrator
Office of the Police and Crime Commissioner
St Georges Chambers
St Georges Street
Winchester
SO23 8AJ**

Or email to icv.scheme@hampshire.pnn.police.uk