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| Name of Applicant #1: | Name of Applicant #2: |
| DOB: | DOB: |
| Address:Post Code: | Address:Post Code: |
| Phone number (home): | Phone number (home): |
| Mobile: | Mobile: |
| E-mail: | E-mail: |
| Bank Name: | Sort Code: | Account No: |
| **References: Please provide the contact details of two referees** |
| Name:Address:Mobile:Email: Your relationship to/with referee | Name:Address:Mobile:Email: Your relationship to/with referee |
| Are you licenced under the Housing Act 2004? | Yes | No |
| Are you licenced / registered as a HMO House of Multiple Occupancy? | Yes | No |
| Are you a member of the National Landlords Association (NLA)? | Yes  | No |
| Do you currently hold an enhanced DBS check?  | Yes | No |
| Has anyone in the household had parental responsibility removed at any time? | Yes | No |
| Has anyone in the household been prohibited from privately fostering? | Yes | No |
| How long have you been offering accommodation for rent? |  |
| Details of other people living in the house:  |  |  |
| Name: | Relationship to host parent: | Sex: | Age: |
| Name: | Relationship to host parent: | Sex: | Age: |
| Name: | Relationship to host parent: | Sex: | Age: |

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| **Some of the following are required by law - the club may be able to support you with training in these areas** |
| **Health & Safety:** Do you hold a Health & Safety Certificate? | Yes | No |
| **Fire safety:** The Regulatory Reform – Fire Safety Order 2005, states that fire safety law applies to any household where anyone pays to stay in that property. It makes any provider responsible for taking steps to protect the people using the premises from risk of fire.**The provider MUST**:* Carry out a fire risk assessment
* If necessary, improve fire safety measures
* Keep the risks, and fire safety measures, under review

For further information refer to HM Government Document which can be downloaded at https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/11085/payingguests.pdf**Do you have paying guests? If so, fire safety applies to you and you must take action.**  |
| Have all fires & chimney flues been checked? | Yes | No |
| Is there a smoke alarm & are carbon monoxide detectors fitted?  | Yes | No |
| Have you been inspected by the Fire Service? | Yes | No |
| Do you have full landlord insurance? (Copies will be required) | Yes | No |
| Do you have a Gas Safety Record? (Copies will be required) | Yes | No |
| **Diet & nutrition:**Would you be prepared to involve the apprentices in menu planning & food choices? | Yes | No |
| **Safeguarding:** the Apprentices are legally children therefore keeping them safe from risk of harm or abuse is of paramount importance in the selection of accommodation |
| Are you prepared to undertake safeguarding / child protection training? | Yes | No |
| Do the TVs in the house have restricted access to adult channels? | Yes | No |
| How regularly would the Apprentice(s) be alone in the house & at what times? |  |
| How often would the Apprentice(s) be in the household with other residents but without your presence in the home? |  |
| **Culture & Diversity:** |
| If the Apprentice(s) had any cultural requirements such as diet or prayer, would you be prepared to cater for these? | Yes | No |
| Would you be prepared to provide a supportive environment for someone from an ethnic minority background? | Yes | No |
| **Pets:** |
| Do you have pets in the house? | Yes | No |
| If yes, please detail  |  |
| **Personal valuable items:** whilst we understand that it may not be possible for every venue to have individual safes for use by Apprentice(s), it is important that Apprentice(s) feel they have a safe & secure place to store valuable items. The provider will be responsible for the insurance of property belonging to the Apprentice whilst it is on their property. |
| Will the Apprentice have a lock on their door? | Yes | No |
| Internally and / or externally lockable? |