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GLASGOW CITY COUNCIL – EDUCATION SERVICES

SCHOOL LET APPLICATION FORM

PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS

IMPORTANT INFORMATION – PLEASE ENSURE YOU HAVE READ, UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS OF LET AND THE GENERAL AND SPECIFIC PRIVACY NOTICE ON HOW WE COLLECT, USE, SHARE AND STORE YOUR PERSONAL INFORMATION

Complete a separate form for each establishment requested

The attached form “PROTECTION OF VULNERABLE GROUPS” should be completed if you provide organised and supervised activities for children less than 18 years of age and/or protected adults.

SECTION 1 Group Details

| | | | |
|---|---------------|--|--|
| Full name of group | | | |
| Purpose of group | | | |
| Geographic area covered by group | | | |
| Type of Organisation, i.e. voluntary/community, commercial, other | | | |
| Purpose of Let | | | |
| Other lets currently held by group | Establishment | | |
| | Accommodation | | |
| | Dates | | |
| Internal bookings please add charge code | | | |

SECTION 2 Applicant Details (Please note applicants must be aged 18 years or over)

| | | | |
|---|----------------------|--|--|
| Full Name and Address of person making application and responsible for payment | | | |
| Surname | Forename(s) | | |
| Address (include flat no) | | | |
| | | | |
| Post Code | | | |
| Home Tel. Number | Business Tel. Number | | |
| E-mail address | Mobile Tel. Number | | |
| Name of Supervisor in charge of activity if different from let holder (Please note supervisors must be aged 18 years or over) | | | |
| Qualifications of supervisor relating to activity | | | |

SECTION 3 Membership Details relating to this application (i.e. number of people expected to attend)

Numbers Attending: Under 18 _____ 18- 60 _____ Over 60 _____ Total attending _____

Fee charged Nightly £_____ Weekly £_____ Membership Fee £_____ Annual Fee £_____

Section 4 Accommodation Details

| | | | | | | | |
|---------------------------------|---------------|--|---------------|--|------------|--|--|
| Name of establishment required: | | | | | | | |
| Accommodation requested: | Assembly Hall | | G P Room | | Classroom | | |
| | Gymnasium | | Dining Hall | | Games Hall | | |
| | Pitch | | Swimming Pool | | *Other | | |
| *Please give details: | | | | | | | |

Do you require changing rooms if available? Yes/No
Do you require the use of the school kitchen? Yes/No

Frequency of let - please specify: One-Off ☐ Daily ☐ Weekly* ☐ Fortnightly ☐

*Please specify Number of Lets per week

| | | | | |
|--|-----------------------------|--------------------|-------------------|--------------------|
| Date(s)/Times requested: | Start Day & Date | Finish Date | Start Time | Finish Time |
| | | | | |
| Note - Part hours will be charged at full hourly rate. | | | | |

Do you require this let during school holidays? Yes/No

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Section 5 – Declaration

Before signing the declaration, please ensure that you have read and understood the conditions of let.

It is a condition of this let that you:

Please Tick
to confirm

- | | | |
|-----|---|--------------------------|
| 1. | Are in possession of current public liability insurance | <input type="checkbox"/> |
| 2. | Are in possession of relevant, up to date qualifications relating to your let activity | <input type="checkbox"/> |
| 3. | Are in possession of relevant copyright licences for your activity under the Copyright, Designs and Patents Act 1988 | <input type="checkbox"/> |
| 4. | Are in possession of relevant licences under the Children (Performance and Activities) (Scotland) Regulations 2014 | <input type="checkbox"/> |
| 5. | You have completed and attached the Protection of Vulnerable Groups form (if required) | <input type="checkbox"/> |
| 6. | You have the relevant PAT testing certificates in place for electrical equipment | <input type="checkbox"/> |
| 7. | You have carried out appropriate risk assessments | <input type="checkbox"/> |
| 8. | You are registered with the Care Inspectorate for lets relating to child care activities | <input type="checkbox"/> |
| 9. | You have completed appropriate documentation for swimming pool bookings (if required) | <input type="checkbox"/> |
| 10. | You have proof of community status (if applicable) | <input type="checkbox"/> |
| 11. | For the appropriate payment charges, you are confirming that you are a | |
| | a. community group | <input type="checkbox"/> |
| | b. commercial group | <input type="checkbox"/> |
| | c. other | <input type="checkbox"/> |
| 12. | You have read and agree to abide by the full terms and conditions of let and confirm you have been provided with the privacy notice on how we collect, use, share and store personal information https://www.glasgow.gov.uk/privacy | <input type="checkbox"/> |

I understand that Glasgow City Council may require to see written proof of any of the above documentation at any time.

I declare the foregoing to be a true and accurate statement and accept responsibility for payment of all charges, including damage to property as the result of occupancy of premises. I understand that all activities must be organised in accordance with Glasgow City Council's policy and that failure to disclose any relevant information may lead to the let being cancelled or altered and additional charges may be made.

It is a requirement that all cancellations must be emailed to the School Letting Section (e-mail: schoolletting@glasgow.gov.uk) at least 3 working days prior to the let taking place. Failure to comply with this condition will result in the full cost of the let being levied.

Signature of Applicant: _____

Position held: _____

Date: _____

Completed forms should be emailed to the School Letting Section at the above email address at least 10 working days prior to the date(s) requested. Please adhere to this timescale at all times to ensure you have the best opportunity of being able to book the accommodation you require. Please be aware that at peak periods (March/April and August/September) this timescale may be longer.

Please note that incomplete forms will be returned to you resulting in a delay of your accommodation being booked

Written confirmation of let must be received from the School Letting Section prior to the commencement of let.

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SCHOOL LET APPLICATION FORM

Protection of Vulnerable Groups

| Protection of Vulnerable Groups (Scotland) Act 2007 (the PVG Scheme) | | |
|--|------------|-----------|
| | Yes | No |
| Do you provide organised and supervised activities for children less than 18 years of age and/or protected adults? | | |
| If yes, please answer the following: | | |
| Do you know about the PVG Scheme and are you fully aware of the implications for your organisation? | | |
| Do you know that anyone you recruit to do 'regulated work' (whether paid or unpaid) must not be barred from work with children and/or protected adults? | | |
| It is an offence to use someone in a regulated work position if they are barred. You should therefore ensure they are PVG Scheme members | | |
| Are you registered with CRBS, Disclosure Scotland or with a recognised umbrella body? | | |
| Are people recruited by you into a regulated work position (paid or unpaid) since 28 February 2011 PVG Scheme members? | | |
| Does your group have a Child Protection Policy and/or Protecting Vulnerable Adults policy which incorporates a code of conduct and procedures for responding to concerns? | | |
| Have your leaders had child protection training? | | |
| Does your organisation take all reasonable steps to make sure that children, young people, vulnerable adults and those who work and support them are kept safe during the organisation's activities? | | |

| | |
|--|--------------|
| I confirm that, under the Protection of Vulnerable Groups (Scotland) Act 2007 (the PVG Scheme), I am not barred and to the best of my knowledge anyone working with my organisation (including in a voluntary capacity) is not barred from regulated work with children or protected adults, nor am I or anyone working with my organisation under consideration for listing. | |
| Please tick if you hold a Statement of Scheme Membership under the PVG Scheme (NB you do not have to supply this) | |
| Signed: | Date: |
| Organisation | |

| | |
|----------------------------|--|
| FOR OFFICE USE ONLY | |
| PVG Compliant | |

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