# Self-disclosure form for regulated activity

For completion by the candidate/person applying for the role:

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| --- | --- |
| Name of candidate/person: |  |
| Previous name(s):  Please include date(s) each name was used (MM/YYYY) |  |
| Address with postcode: |  |
| Telephone/mobile number: |  |
| Date of birth: |  |
| Gender: |  |

As the role you have applied for involves regulated activity or regulated work, you will be required to undergo the relevant vetting and barring checks.

All information you provide will be treated as confidential and managed in accordance with relevant data protection legislation and guidance. You have a legal right to access information held about you.

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| --- | --- | --- | --- | --- |
| Have you ever been known to any Children’s Services department or Police as being a risk or potential risk to children? | | | YES NO | |
| If yes, please provide further information: | | | | |
| Have you been the subject of any investigation by any organisation or body due to concerns about your behaviour towards children? | | | YES | NO |
| If yes, please provide further information: | | | | |
| Have you ever been the subject of disciplinary procedures or been asked to leave employment or voluntary activity due to inappropriate behaviour towards children? | | | YES | NO |
| If yes, please provide further information: | | | | |
| Do you have any convictions, cautions, reprimands or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) 2013? | | | YES | NO |
| If yes, please provide further information: | | | | |
| **Confirmation of declaration** (tick box below) | | | | |
|  | I agree that the information provided here may be processed in connection with recruitment purposes and I understand that an offer of employment may be withdrawn or disciplinary action may be taken if information is not disclosed by me and subsequently come to the organisation’s attention. | | | |
|  | In accordance with the organisation’s procedures if required I agree to provide a valid criminal record certificate and consent to the organisation clarifying any information provided on the disclosure with the agencies providing it. | | | |
| **Signed** | |  | | |
| **Date** | |  | | |