

Confidential Declaration – Self Disclosure

This form must be completed by everyone wishing to work with children, young people or adults at risk (in voluntary or paid roles). This form will be held confidentially and securely by the church Designated Safeguarding Lead in line with the Data Protection Act 1998. You have a right to access information held about in you in line with the Data Protection Act 998

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| Full Name (including Middle names) | |
| Have you been known by any other names? | <i>Please give details including dates</i> |
| Date of Birth | |
| Gender | |
| Date of Birth | |

Please sign in the boxes below to confirm the information in each section is correct

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| 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 (as amended in 2013)? <i>For helpful information about which offences need to be declared see:</i> https://www.gov.uk/government/publications/dbs-filtering-guidance/dbs-filtering-guide | Yes No |
| Please give details below | |
| Signature of candidate: | |
| Have you ever been known to any Local Authority children or adult safeguarding team, or the police as being a risk or potential risk to children, young people or adults at risk? | Yes No |
| Please give details below | |
| Signature of candidate: | |
| Have you ever been the subject of an investigation by any organisation or body due to concerns about your behaviour towards children or adults at risk? | Yes No |
| Please give details below | |
| Signature of candidate: | |

Confirmation of Declaration (Please tick below)

(✓)

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| | I agree that the information provided here may be processed for recruitment purposes (both to employed and voluntary posts). I understand that the offer of employment or voluntary work could be withdrawn if information is not disclosed by me and subsequently comes to the church's attention. |
| | In accordance with the Church Safeguarding Policy and Procedures I will provide a valid DBS Certificate and consent to the Baptist Union of Great Britain, on behalf of the church, clarifying any information provided on it with the agencies providing it. |
| | I will inform the Church within 24 hours if I am subsequently investigated by any agency or organisation in relation to concerns about my behaviour towards children, young people or adults at risk. |
| | I understand that the information in this form, the results of the DBS check and information supplied by third parties may be passed to other persons or organisations in circumstances where this is considered necessary to safeguard children, young people or adults at risk. |

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|------------------------|--|
| Signature of candidate | |
| Print Full Name | |
| Date | |

THIS FORM SHOULD BE COMPLETED AND RETURNED TO THE DESIGNATED PERSON FOR SAFEGUARDING FOR YOUR CHURCH OR ORGANISATION WHO WILL RETAIN IT IN A SECURE CONFIDENTIAL MANNER.

THIS FORM WILL BE ACCESSED IF A CONCERN IS RAISED ABOUT YOUR SUITABILITY FOR THE POSITION APPLIED, eg A BLEMISHED DBS DISCLOSURE.