



MODEL REHABILITATION OF OFFENDERS ACT 1974 – DISCLOSURE FORM

This form is supplementary to the relevant section relating to the Rehabilitation of Offenders Act 1974, of the relevant CES model Application Form.

Where you are making an application in writing, this form must be completed and sent in a separate, sealed envelope marked “confidential” and returned with your completed Application Form and any other supplementary or supporting documents.

In accordance with statutory requirements certain pre-employment checks are conducted for positions involving working with vulnerable groups, specifically children and vulnerable adults.

The information obtained from these checks is used to help safeguard these groups. It will not be used to discriminate unfairly against those with convictions which we consider as unrelated to working with vulnerable groups. Having a criminal record will not automatically bar you from employment or voluntary work with us.

As the position you are applying for gives you privileged access to vulnerable groups, it is an Exempted Occupation under the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. **This means that you must disclose spent and unspent convictions on this form. This includes any driving offences.**

Failure to disclose any criminal convictions could lead either to your application being rejected or, if you are appointed, to dismissal if it is subsequently discovered that you have had any criminal convictions. It is a criminal offence to apply for a position working with children if you are excluded from doing so.

Failure to complete this form may render your application invalid.

Full Name:

Date of Birth:

Post Applied for:

Please tick as appropriate:

(a) I do not have any convictions, spent and/or unspent (current):

(b) I do have conviction(s), spent and/or unspent (current):

If you have ticked box (b) above, please set out the details of the conviction(s) below:-

Date of Conviction/pending Hearing/Caution/Reprimand/Warning	Offence	Sentence	Details of Police/Court involved

Declaration: I hereby certify that the information given above is true and accurate:

SIGNATURE :

DATE :

Data Protection Act

I hereby give my consent for the information provided on this form to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the Data Protection Act 1998.

SIGNATURE :

DATE :

