EATON HOUSE SCHOOLS POLICY DOCUMENT

Staff Disqualification Self-Declaration Form

	Starr Disqualification Self-Declaration Form				
This fo	rm is to be completed by all relevant staff and volunteers as part of pre-employm	ent che	cks.		
Full Na	me:				
Addres	c.				
Auures	5.				
		_			
Please	respond to the questions listed below and sign the declaration to confirm that th	ere are	no reason	s why you	
	not be working with children. If you are unable to meet any of the following asp	ects, ple	ase disclo	se this	
	iately to the Head. Please circle yes or no against each point.				
Your F	Personal Situation				
•	Have you been barred from working with children		Yes	No	
	(i.e does your name appear on the DBS Barring List)?				
•	Have you been cautioned for, convicted of or charged with certain violent and s	exual	Yes	No	
	criminal offences against children and adults, either at home or abroad?				
	(Please see a list of the relevant offences set out in the Appendix below.)				
Care o	f Children (If applicable)				
•	Have your own children been taken into care?	n/a	Yes	No	
•	Have your own children been the subject of a child protection order?	n/a	Yes	No	
•	Have you had your registration cancelled in relation to childcare or children's homes or have you been disqualified from private fostering?	n/a	Yes	No	
•	Are you 'Disqualified from Caring for Children'?	n/a	Yes	No	
If you l	nave answered 'yes' to any of the above, please provide further information below	w. This ii	nformatio	n will be	
	determine whether or not you are disqualified from working with children. Plea				
	details, you do not need to provide details about any protected cautions or prot	ected co	nvictions	. Please ask	
the He	ad for more information.				
Please	note: Staff who are disqualified from childcare or registration, may apply to Ofste	ed for a	waiver of		
•	lification. A factsheet explaining the process can be found on this link:		ممانامام		
	<u>/www.gov.uk/government/publications/applying-to-waive-disqualification-early-ers</u> . Such staff may not be employed in the areas from which they are disqualified	7			
	ement of those settings, unless and until such waiver is confirmed. Please speak t				
l undei	stand my responsibility to safeguard children, and I am aware that I must notify t	he scho	ol immed	iately of	
•	ng that may affect my suitability to work with children. I will ensure that I notify no notify notitions, cautions, court orders, reprimands or warnings I may receive.	ny emplo	oyer imm	ediately of	
any contrictions, countries of acts, reprintants of warnings that receive.					

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I give permission for you to contact any previous employer, local authority staff, the police, the DBS, or any medical professionals to share information about my suitability to care for children.					
Signed :	Date :				
For HR manager: I have reviewed the above and confirm that no further actio	n is to be taken.				
HR Manager signature : OR	Date :				
I have reviewed the above and the following action has been taken:					
Signed : Date action	taken :				
Appendix: List of relevant convictions which can be found he	ere:				
https://www.gov.uk/government/publications/dbs-list-or- criminal-record-check	f-offences-that-will-never-be-filtered-from-a-				
Please note that due to changes in legislation, this list may no please contact the Head.	ot be exhaustive. If you have any queries or concerns,				