

**PROTECTION OF CHILDREN, YOUNG PEOPLE AND VULNERABLE ADULTS
CONFIDENTIAL DECLARATION FORM**

This must be completed and **retained by the church** before the appointment of any paid staff or volunteers working with children / young people / vulnerable adults **in addition to a DBS check**

1a	Have you ever been convicted of any criminal offence ¹ (including any spent convictions under the Rehabilitation of Offenders Act 1974)?			
Yes		No		Please tick

If yes, please state the nature and date(s) of the offence(s), continuing on a separate sheet if necessary.

1b	Have you ever been cautioned by the police, given a reprimand or warning or bound over to keep the peace?			
Yes		No		Please tick

If yes, please give full details, continuing on separate sheet if necessary.

1c	Are you at present under investigation?			
Yes		No		Please tick

If yes, please give full details, continuing on separate sheet if necessary.

1d	Have you ever been found by a court exercising civil jurisdiction (including matrimonial or family jurisdiction) to have caused significant harm ² to a child or young person under the age of 18 years? Or has any court made such an order against you on the basis of any finding or allegation that any child or young person was at risk of significant harm ² from you?			
Yes		No		Please tick

If yes, please give full details, continuing on separate sheet if necessary.

1e	Have you ever been found by a court exercising civil jurisdiction to have caused significant harm ² to a vulnerable adult? Or has any court made such an order against you on the basis of any finding or allegation that any vulnerable adult was at risk of significant ² harm from you.			
Yes		No		Please tick

If yes, please give full details, continuing on separate sheet if necessary.

2a	Has your conduct ever cause or been likely to cause significant harm² to a child, young person under the age of 18, or vulnerable adult or put any of the same at risk of significant harm.?			
Yes		No		Please tick

2b	To your knowledge has it ever been alleged that your conduct has resulted in any of those things? This question relates to any conduct, whether in a paid capacity, as a voluntary worker, or otherwise.			
Yes		No		Please tick

If yes, please give full details, including the date(s) and nature of the conduct or alleged conduct, and whether you were dismissed, disciplined, moved to other work or resigned from any paid or voluntary work as a result. Please continue on a separate sheet if necessary.

3	Has an adult in your care or for whom you have had power of attorney ever been removed from your care, or ahs a child in your care or for whom you have or had parent responsibility ever been removed from your care, been made subject of a Child Protection Plan or been the subject of a care order, a supervision order, a child assessment order or an emergency protection order under the Children Act 1989, or a similar order under other legislation?			
Yes		No		Please tick

If yes, please give full details, continuing on a separate sheet if necessary.

4	Have you any health problem(s) which might affect your work with children or young people under the age of 18, or vulnerable adults?			
Yes		No		Please tick

If yes, please give full details, continuing on a separate sheet if necessary.

5	Have you since the age of 18, ever been known by any name other than the one given below?			
Yes		No		Please tick

If yes, please give full details, continuing on a separate sheet if necessary.

6	Have you, during the last five years, had any home address other than that given below			
Yes		No		Please tick

If yes, please give full details, continuing on a separate sheet if necessary.

¹ all previous convictions, with the exception of technical motoring offences leading only to a fine, should be disclosed

² 'Significant harm' involves serious ill-treatment of any kind including neglect, physical, emotional or sexual abuse, or impairment or physical or mental health development.

DECLARATION

I declare that the above information (*and that on the attached sheets) is accurate and complete to the best of my knowledge. * delete if not applicable

Signed _____ Date _____

Full Name _____ Date of birth _____

Address _____
