

STRICTLY CONFIDENTIAL

#### DECLARATION OF CONVICTIONS (REHABILITATION OF OFFENDERS ACT 1974) – EXEMPTED POSTS

**Please note carefully the following information:**

The position for which you are applying involves substantial access to children or vulnerable adults. It is therefore exempt from Section 4 (2) of the Rehabilitation of Offenders Act 1974 by virtue of the Exceptions Order, and you are required to declare any convictions, cautions or bindovers you may have even if they would otherwise be regarded as “spent” under this Act. The information you give will be treated in confidence and will only be taken into account in relation to this application.

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| In answering the following questions you must disclose details of all convictions and cautions, including “spent” convictions, and bindovers.Have you ever been cautioned or convicted of a criminal offence? YES / NOIf YES, please give below brief details of all convictions and cautions, including “spent” convictions and cautions.……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………Do you have any bindovers? YES / NOIf YES, please provide details.…………………………………………………………………………………………………………………………………If you have declared any convictions, cautions or bindovers above, please provide full details in a sealed envelope and return it with this form. |
| Have you been disqualified from working with children, does your name appear on List 99 or the Protection of Children Act list? YES / NOIf YES, please provide brief details below.…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………Are you subject to any sanctions imposed by a regulatory body, for example the General Teaching Council? YES / NOIf YES, please provide brief details below.………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
|  PTO |

Under Government regulations the School is able (with your consent) to access records of criminal convictions. In the event of an offer of employment your written permission will be sought for this check to be undertaken with the Criminal Records Bureau and you will be required to complete an Enhanced Disclosure Application Form. **If you do not give your permission for this check to be undertaken, it will not be possible to consider your application further.** As part of its checking procedure the Bureau will also check registers of persons found to be unsuitable to work with vulnerable people which are maintained by the Department of Health and Department for Education.

Please note that by signing this declaration you are stating that the information provided is complete and accurate to the best of your knowledge. Knowingly omitting or falsifying information could lead to your removal from the recruitment process or, if already in post, could result in your dismissal. In some cases, if there are concerns around child protection, the matter may be referred to the police.

NAME ……………………………………………………………………………………………………

SIGNATURE ………………………………………………………………………………………….

DATE …………………………………………………………………………………………………….

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| **THIS DECLARATION MUST BE SIGNED AND RETURNED WITH YOUR APPLICATION FORM** |

For Office use only

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| Date of Disclosure |  |
| Type of Disclosure |  |
| Post for which Disclosure was requested |  |
| Reference No. issued by CRB |  |
| Recruitment decision taken |  |