**Safeguarding Licence Renewal Form – UPDATE SERVICE ONLY**

**Private and confidential**

All information will be treated as confidential and managed in accordance with relevant data protection legislation and guidance. You have a right of access to information held on you under the Data Protection Act 2018.

**Part A**

Title: ......... First Name: ..................................... Middle Name/s:………………………………………………..

Family Name: .............................................................

Any other previous names by which you have been known: .............................................................................................................................................................

Address: ...................................................................................................................................................

Post Code: ......................................................................

Telephone Number: .......................................................

Email Address: ..................................................................................................................................................................

Date of Birth: .......................................... Gender: ………………………………………… (Please state)

DBS Certificate number: …………………………………………………………………………………………………………………

Original Organisation completing checks ( if not GB Skate /FARS /BIPHA:

…………………………………………………………………………………………………………………………………………………………

Date of Original Checks: …………………………………………………………………………………………………………………..

N.B. The Postcode **MUST** be completed

|  |  |  |
| --- | --- | --- |
| **Post being applied for in a new Club or Organisation (or register with an existing Club)** | | |
| **Club or Organisation** | **Position Applied For** | **Start Date** |
|  |  |  |

I confirm that I am happy for a GB Skate Artistic Safeguarding Officer to review my DBS details on the update service -

**Signature**

**……………………………………………………………………………………………….........................................................**

Print Name: ..........................................................................................

Date: ....................................................................................................

**Part B**

**Self-Declaration** (for completion by the individual named in part A)

**1.** Do you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974? **Yes/ No**

If Yes please supply details:

.......................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................

**2.** Do you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020?

**YES/ NO**

If YES please give details: ....................................................................................................................................................................................................................................................................................................................................

**3.** Have you been formally charged with any other offence in any country which has not yet been disposed of? **Yes/ NO**

If YES please give details: ....................................................................................................................................................................................................................................................................................................................................

4. Are you currently subject to any criminal investigations or pending prosecutions by the police in any country which may have a bearing on your suitability for this position? **Yes/No**

If YES please give details: ....................................................................................................................................................................................................................................................................................................................................

5. Have you ever been known to any Children’s Services department or the police as being a risk or potential risk to children? **Yes/No**

If YES please give details: ....................................................................................................................................................................................................................................................................................................................................

6. Have you been the subject of any formal action, disciplinary investigation and/or sanction by any organisation due to concerns about your behaviour towards children? **Yes/No**

If YES please give details: ....................................................................................................................................................................................................................................................................................................................................

7. Have you ever been dismissed for misconduct from any employment, volunteering, or other position previously held by you, in circumstances which may have bearing on your suitability for this position? **Yes/No**

If YES please give details: ....................................................................................................................................................................................................................................................................................................................................

8. Are you currently subject to any fitness to practise investigations or proceedings by a regulatory, governing, or licensing body in any country, which may have bearing on your suitability for this position? **Yes/No**

If YES please give details: ....................................................................................................................................................................................................................................................................................................................................

|  |
| --- |
| Please tick the boxes below and then sign this form. |
| * I agree that the information provided here may be processed in connection with recruitment purposes and I understand that an offer of employment may be withdrawn or dismissal may result if information is not disclosed by me and subsequently comes to GB Skate Artistic’s attention. |
| * In accordance with the Organisation’s procedures, if required I agree to provide a valid DBS certificate and consent to the organisation clarifying any information provided on the disclosure with the agencies providing it. * I agree to inform the Organisation 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 vulnerable adults. |
| * I understand that the information contained on this form, the results of the DBS Check and information supplied by third parties may be supplied by the organisation to other persons or organisations in circumstances where it is considered necessary to safeguard children and young people |

**I certify that all information in this form is true and correct to the best of my knowledge and realise that false information or omissions may lead to termination of my services. I have read and understood GB Skate Artistic Safeguarding Policy.**

Signed by the above-named individual: ............................................................................

Print name: .......................................................................................................................

Date: .................................................................................................................................

If completing online, this form should be returned to:

**The GB Skate Artistic Safeguarding Team at** [**safeguarding@gbskateartistic.co.uk**](mailto:safeguarding@gbskateartistic.co.uk)