Confidential Declaration Form Parish Safeguarding Children Representative

Declaration form for all staff and volunteers working with children and young people. **Surname:** Maiden Name (if applicable): **Christian Names: Address:** Tel No: Mobile No: Date of Birth: Place of Birth: Any other name previously known as: Do you have any prosecutions pending or have ever been convicted of a criminal offence or been the subject of a caution or of a bind over order? No Yes If yes, please state below the nature and date(s) of the offence(s), the court responsible for dealing with the matter and the approximate date of the court hearing. Nature of Offence: Date of Offence: In accordance with the Data Protection Act 1988 & 2003 I give my consent for the information contained in this form to be processed and stored in accordance with policy for the purposes of recruitment and employment. Signed: Date: