

DBS APPLICATION

REHABILITATION OF OFFENDERS ACT

The position you are applying for (whether paid or voluntary) is listed in Schedule 1, Part II of the Rehabilitation of Offenders Act (Exceptions) Order 1975, so we are entitled to ask Exempted Questions as defined by Section 113(5) of The Police Act 1997 about you.

The nature of the work placements offered by us means the terms of Section 4 part 2 of the Rehabilitation of Offenders act (1974) (exceptions) Order 1975, apply. You must declare here any convictions or cautions you have ever received, even those which would normally be considered spent.

Please provide 5 years continuous address history with NO gaps.

Please ensure you sign the declaration at the bottom of the page even if you have a DBS on the update service

Current / Valid DBS Certificate Number (If applicable):

Title: Forename(s):

Surname / Family Name:

Are you currently, or have you ever been known by any other name YES NO

If Yes, Please list all names below and dates when you changed your name:

Name: Date(s) Used: / / To / /

Name: Date(s) Used: / / To / /

Current Home Address:

Post Code:

Date Moved Here: (MM/YYYY)

Previous Address:

Post Code:

Date Moved Here: (MM/YYYY)

Previous Address:

Post Code:

Date Moved Here: (MM/YYYY)

Previous Address:

Post Code:

Date Moved Here: (MM/YYYY)

Previous Address:

Post Code:

Date Moved Here: (MM/YYYY)

Previous Address

Post Code:

DBS APPLICATION (Cont)

Nationality at Birth:

Current Nationality:

Passport Number & Country of Issue:

Have you ever been convicted of a criminal or civil offence? YES NO

If yes, please give details:

Have you ever received a police caution? YES NO

If yes, please give details:

Are you, as far as you know, under investigation by the Police? YES NO

Do you have any Prosecutions pending? YES NO

Has there ever been a suggestion that you are unsuitable to work with Vulnerable People? YES NO

National Insurance Number:

Driving Licence Number & Country of Issue:

If you have answered YES to any of the above, please provide a **full written statement** with your application form. Any information you provide will be treated in the strictest confidence.

I authorise Flax Healthcare Ltd to provide the above details to the DBS in order to obtain a DBS check for the purpose of obtaining agency / temporary work on my behalf. If registered with the DBS update service, I give Flax Healthcare consent to check my DBS status as part of the registration process and at regular intervals as required for obtaining agency temporary work for me.

I understand that my DBS Certificate information may be shared with any Client considering employing me on a temporary or permanent basis. I will inform Flax Healthcare immediately if anything changes that would affect my answers to the above.

OVERSEAS POLICE CHECKS

Have you been outside the UK for 6 months or more in the last 5 years? YES NO

In Addition to the DBS check, all overseas applicants, or any applicant (including UK residents) who have spent a continuous period of 6 months or more outside the UK in the last 5 years prior to registration with Flax Healthcare, will be required to provide an overseas Police Check. The overseas Police Check must be in accordance with the country's justice system and the UK's requirements.

Signed: _____

Date: _____