



Amber Valley CVS: A Centre for Voluntary Services

Proud to support our community and its people with voluntary action

Important points to remember when completing the **DBS Application Form**

Please :

- **USE BLACK INK AND CAPITAL LETTERS**
- **WRITE NEATLY IN THE BOXES**
- **PUT AN 'X' IN THE BOXES, NOT A TICK**
- **NO CORRECTION FLUID OR PHOTO COPIES OF ID**
- **FULLY COMPLETE INSERT SHEET & RETURN WITH EACH FORM**
- **LEAVE A BLANK BOX AS A SPACE BETWEEN WORDS**
- **DO NOT STRIKE THROUGH ANY SECTIONS OF THE FORM EVEN IF NOT RELEVANT TO YOU**
- **DO NOT STATE "NOT APPLICABLE" OR "NA" IN ANY SECTIONS**
- **DO NOT WRITE ANYWHERE ON THE FORM UNLESS INSIDE THE BOXES**
- **IF YOU MAKE A MISTAKE WHEN SELECTING ONE OF THE X BOXES, PLACE A CROSS IN THE CORRECT BOX AND CIRCLE IT**
- **IF YOU MAKE A MISTAKE WHEN COMPLETING YOUR FORM, PUT A LINE THROUGH THE MISTAKE, IF ENOUGH EMPTY BOXES REMAIN, WRITE THE CORRECT INFORMATION STARTING IN THE NEXT AVAILABLE TEXT BOX TO THE RIGHT. IF THERE IS NOT ENOUGH SPACE YOU MUST INCLUDE THE INFORMATION ON AN OFFICIAL CONTINUATION SHEET**
- **DO NOT ATTACH ANYTHING TO THE FORM BY ANY MEANS IE, CONTINUATION SHEETS, ADDITIONAL INFORMATION & CHEQUES SHOULD BE PLACED INSIDE THE FORM WHEN SUBMITTED**
- **ALL FIELDS MARKED IN YELLOW, MUST BE COMPLETED**
- **IF YOU ANSWER YES TO ANY OF THE SECTIONS IN YELLOW YOU MUST THEN COMPLETE THE REST OF THE DETAILS AS REQUESTED**
- **SECTION 61 - LINE 1 = CHILD AND/OR ADULT WORKFORCE.**
- **SECTION 61 - LINE 2 = POSITION**
- **DO NOT COMPLETE ANY BOXES IN Y OR Z**
- **DO NOT SIGN ON BACK OF FORM – THIS WILL VOID YOUR APPLICATION**
- **IF YOU REQUIRE A SENSITIVE APPLICATION PROCESS PLEASE CONTACT US FOR MORE INFORMATION.**

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a applicant's details

1 title ☐ mr ☒ mrs ☒ miss ☒ ms ☐ other

2 surname

3 forename(s)

4 have you ever been known by any other names? no ☒ yes ☒ If 'yes' you must complete the full name(s) in a5 - a13 as appropriate, if 'no' go to a14 Use a continuation sheet if necessary, available from www.homeoffice.gov.uk/dbs

5 surname

6 forename(s)

7 dates from and to -

8 surname

9 forename(s)

10 dates from and to -

11 surname

12 forename(s)

13 dates from and to -

Section a : Remember to include ALL other forenames or surnames used from birth to present. Don't forget to include the dates they were used, from and to.

11 surname

12 forename(s)

13 dates from and to -

14 date of birth

15 gender male ☒ female ☒

16 place of birth (town)

17 place of birth (country)

All sections : Please note date formats. Date of birth & date of signature must be written as day-month-year XXXX2015, but all other dates are month & year only XX2015



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20	do you have a national insurance number?	no <input type="checkbox"/> yes <input type="checkbox"/> If 'yes' you must complete a21, if 'no' go to a22
21	national insurance number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
22	do you hold a valid UK driving licence?	no <input type="checkbox"/> yes <input type="checkbox"/> If 'yes' you must complete a23, if 'no' go to a24
23	driving licence number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
24	do you hold a valid passport?	no <input type="checkbox"/> yes <input type="checkbox"/> If 'yes' you must complete a25, a26, and a27, if 'no' go to a30
25	passport number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
26	nationality	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
27	country of issue	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
28	not used	D O N O T U S E <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
29	not used	D O N O T U S E <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
30	do you have a Scottish vetting & barring number?	no <input type="checkbox"/> yes <input type="checkbox"/> If 'yes' you must complete a31, if 'no' go to section b
31	Scottish vetting & barring number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

registered body use only	
a1-a3 verified	<input type="checkbox"/>
a14 verified	<input type="checkbox"/>
a21 verified	<input type="checkbox"/>
a23 verified	<input type="checkbox"/>
a25 verified	<input type="checkbox"/>

Section a : 20-31 Follow form instructions located next to each question.

This section to be completed by nominated person, to verify the ID you have seen and checked.

b current address		Please give details of your current address. This is the address to which all correspondence will be sent.	
32	address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
33	town/city	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
34	county	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
35	UK postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	36 country <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
37	at address since	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

registered body use only	
current address verified?	<input type="checkbox"/>

Section b : 37 must be written in the correct format, month-year XX2015

This section to be completed by nominated person, to verify the applicants current address.



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c other addresses

You must provide all other addresses where you have lived in the last 5 years. There must be no gaps in dates, however, overlapping dates are acceptable. Use a continuation sheet if necessary, available from www.homeoffice.gov.uk/dbs. If not applicable, go to section e.

38	address		
39	town/city		
40	county		
41	UK postcode	42	country
43	dates from and to		
44	address		
45	town/city		
46	county		
47	UK postcode	48	country
49	dates from and to		

Section c: Please provide all other addresses where the applicant has lived in the last 5 years. There must be no gaps in these dates.

Use a continuation sheet if more space is needed.

e declaration by the applicant

55 do you have any convictions, cautions, reprimands or final warnings which would not be filtered in line with current guidance?

no ☐ yes ☐

56 declaration by the applicant

By signing the applicant declaration box I confirm that the information that I have provided in support of this application is complete and true and understand that knowingly to make a false statement for this purpose may be a criminal offence.

57 date of signature

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Applicant declaration
(please sign within the box provided)

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TCS VER 4.0 03/15 English DAF

Section e : Applicant to sign within the box and date day-month-year, XXXX2015

How to check the status of your applicants with on-line tracking

You can check an applications progress here:

<https://www.gov.uk/disclosure-barring-service-check/tracking-application-getting-certificate>

All you need to access the tracking service is the application form reference number and the applicants date of birth.





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W evidence of identity

58	name of evidence checker	<input type="text"/>
59	have you established the true identity of the applicant, by examining a range of documents as set out in DBS guidance, and verified the information provided by the applicant in sections a and b, by completing the verification check boxes?	no <input type="checkbox"/> yes <input checked="" type="checkbox"/>

Section W : This section to be completed by nominated person.

60	not used	<input type="text"/>						
61	position applied for	<input type="text" value="CHILD WORKFORCE or ADULT WORKFORCE POSITION ie SUPPORT WORKER"/>						
62	organisation name	<input type="text"/>						
63	level of DBS check	Please cross one box only standard <input checked="" type="checkbox"/> If crossed go to x67 enhanced <input type="checkbox"/> If crossed go to x64						
64	are you entitled to know whether the applicant is barred from working with children?	no <input type="checkbox"/> yes <input checked="" type="checkbox"/>						
65	are you entitled to know whether the applicant is barred from working with adults?	no <input checked="" type="checkbox"/> yes <input type="checkbox"/>						
66	does this position involve working with children or adults at the applicant's home address?	no <input type="checkbox"/> yes <input checked="" type="checkbox"/>						
67	application type	<table><tr><td>application is for a new post holder</td><td><input type="checkbox"/></td></tr><tr><td>application is for an existing post holder</td><td><input type="checkbox"/></td></tr><tr><td>application is for an existing post holder who is being re-checked</td><td><input type="checkbox"/></td></tr></table>	application is for a new post holder	<input type="checkbox"/>	application is for an existing post holder	<input type="checkbox"/>	application is for an existing post holder who is being re-checked	<input type="checkbox"/>
application is for a new post holder	<input type="checkbox"/>							
application is for an existing post holder	<input type="checkbox"/>							
application is for an existing post holder who is being re-checked	<input type="checkbox"/>							
68	is this application for a free of charge volunteer?	no <input type="checkbox"/> yes <input checked="" type="checkbox"/>						

Ignore. (Volunteers are £6 each)

By placing a cross in the yes box, you confirm that the post meets the DBS definition of a free of charge volunteer application. Please note that DBS may recover the application fee if this box is marked in error and that this could result in the cancellation of your DBS registration.

Section x This section to be completed by nominated person. Follow form instructions located next to each question.

x64-65: Are you entitled to know whether the applicant is barred from working with children/adults

These questions allow you to indicate if you require a check of the relevant Barred lists as part of the Enhanced DBS check. It is important to help the police determine the relevancy of the information they hold in relation to the position applied for.

A check of both the Children's List and the Adults' List is not automatically included as part of the Enhanced DBS Check – which list is checked is dependent on the nature of the work the applicant will be undertaking. If the position involves working with both groups, then you should answer 'yes' to both questions. If you have not crossed the relevant box and the position involves working with either vulnerable group, the completed DBS check will not show information from the relevant barred lists.

**PLEASE DO NOT COMPLETE SECTIONS Y AND Z
or SIGN BACK OF FORM AS THIS WILL VOID YOUR APPLICATION**

