



SELF-DECLARATION FORM

The information contained in this form will be kept securely by(Name of Parish/Project).
The principle that the welfare of children and adults at risk must be the paramount consideration.

Who should complete this form?

.....(Name of Parish/Project) ask that everyone, who will come into contact with children/adults at risk or the personal details of children/adults at risk, abide by good practice by completing and signing this declaration.

Do you have any prosecutions pending, or have you ever been convicted of a criminal offence or been the subject of a caution?

Yes No

If yes, please state below the nature and date(s) of the offence(s).

Date of offence _____

Nature of offence _____

Have you ever been the subject of disciplinary procedures or been asked to leave employment or voluntary activity due to inappropriate behaviour towards a child/adult at risk?

Yes No

If yes, please provide details including date(s) _____

Full name (print) _____

Any previous surname _____

Address _____

Date of birth _____ Place of birth _____



What role/position are you currently applying for?

Declaration

I understand that if it is found that I have withheld information or included any false or misleading information above, I may be removed from my post, whether voluntary or paid, without notice.

I understand that the information will be kept securely by (Name of Parish/ Project).

I declare that the information I have provided is accurate.

Signed _____ Date _____