# Validation Form



Return this two page form and the DBS application to: thirtyone:eight DBS Service, PO BOX 133, SWANLEY, Kent, BR8 7UQ Remember to keep a copy for your records. You can track the form at <u>Gov.uk/guidance/track-a-dbs-application</u>

| Part A      | Applicant Details.         |
|-------------|----------------------------|
| Applican    | nt details                 |
| Applicant N | Name:                      |
| Form Refer  | erence: Membership Number: |
|             |                            |

## Part B **Volunteer Status.** (you must answer yes/no to the following questions)

#### Is the applicant:

| <b>1.</b> In receipt of any payment (expect for travel and other out of pocket expenses)? | YES / NO |
|-------------------------------------------------------------------------------------------|----------|
| 2. on a work placement which is a requirement of a qualification?                         | YES / NO |
| 3. on a course that requires them to do this role?                                        | YES / NO |
| <b>4.</b> In a trainee position that will lead to a full-time role or qualification?      | YES / NO |

If the answer to any of these questions is YES, the applicant will be classed as a non-volunteer. Non-volunteer applications will be charged an additional fee levied by the DBS.

## Part C Details of identity documents compared with application form.

Full details of the ID checking routes, and acceptable documents can be viewed at <a href="https://www.gov.uk/government/publications/dbs-identity-checking-guidelines">https://www.gov.uk/government/publications/dbs-identity-checking-guidelines</a>

#### Route 1 / 2 - what documents have you seen and checked against the application form:

| Document 1:                                                                                                                                                                                   |                                                |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--|
| Document 2:                                                                                                                                                                                   |                                                |  |
| Document 3:                                                                                                                                                                                   |                                                |  |
| <b>Route 2 - for applicants who are unable to provide a document from Group 1.</b><br>List the three documents seen for Route 2 above and enter the external ID verification reference below. |                                                |  |
| External ID Verification Result Reference :                                                                                                                                                   |                                                |  |
| Route 3                                                                                                                                                                                       |                                                |  |
| Document 1 : Ul                                                                                                                                                                               | K Birth Certificate issued after birth. YES NO |  |
| Document 2 (Fre                                                                                                                                                                               | om Group 2a):                                  |  |
| Document 3:                                                                                                                                                                                   |                                                |  |
| Document 4:                                                                                                                                                                                   |                                                |  |
| Document 5:                                                                                                                                                                                   |                                                |  |
| If the applicant could not produce the required documents, please cross NO in W59 of the disclosure application                                                                               |                                                |  |

form and the DBS will contact the applicant to arrange for them to have their fingerprints taken.

## Part D Eligibility details - explain how the role is eligible for the level requested.

To determine the level of check that can be requested, you should work the role through our interactive eligibility guide at <a href="https://thirtyoneeight.org/eligibility-guide/">https://thirtyoneeight.org/eligibility-guide/</a>

| Is the applicant working in Regulated Activity with children? | NO / YES |
|---------------------------------------------------------------|----------|
| Is the applicant working in Regulated Activity with Adults?   | NO / YES |

#### Position applied for :

Explain below (referring to our guidance) how the role is eligible for the level of DBS being requested:

### art E Recruiter Declaration

I confirm that the documentation and information for the above applicant complies with the DBS Code of Practice and the applicant is legally eligible for a check. I have personally inspected the identity documents listed above and confirm they match the details on the enclosed application form. The applicant is not related to me, and I understand that a DBS check is the last stage of the safer recruitment procedure which we have completed. I declare that the information I have provided in support of this application is complete and true and understand that to knowingly make a false statement for this purpose may be a criminal offence. I am aware that if there are any errors there is <u>admin fee</u> per form that need to be returned.

| Print name: Date: | Recruiter signature: |       | Membership no:    |  |
|-------------------|----------------------|-------|-------------------|--|
| Print name: Date: |                      |       | Daytime phone no: |  |
|                   | Print name:          | Date: |                   |  |

## t F Applicant Declaration

I have read the Disclosure and Barring Service standard/enhanced check privacy policy for applicants at <u>https://www.gov.uk/government/publications/standard-and-enhanced-dbs-check-privacy-policy</u>. I understand and agree to how the DBS will process my personal data and the options available to me for submitting an application.

I confirm that the information, I have provide in support of this application is complete and true and I understand that knowingly making a false statement for this purpose may be a criminal offence.

I confirm that I am aware that my application form will be submitted to the DBS via Royal Mail and if there are any errors this will be returned to the Recruiter via 2nd class post. I am aware that the Recruiter has an alternative option of submitting applications securely online.

| Applicant | signature: |
|-----------|------------|
|-----------|------------|

| Print | name: |
|-------|-------|
|-------|-------|