**Declaration and Consent Form**

Advice NI is committed to safeguarding vulnerable adults and to ensuring equal opportunity for all applicants. Information about criminal convictions is requested to assist the selection process and will be taken into account only when the conviction is considered materially relevant to the position applied for.

Advice NI will obtain an AccessNI Disclosure Certificate for all relevant staff and (where appropriate) volunteers. The AccessNI checks may be for members of staff in a regulated position requiring an enhanced AccessNI check, non-regulated positions eligible for an Enhanced Disclosure without Barred List Check or non-regulated posts requiring a standard AccessNI check.

Some positions also fall within the position of an ‘excepted’ position under The Rehabilitation of Offenders (Exceptions) Order (NI) 1979. This means that you must tell us about all offences and convictions, including those considered ‘spent’. If you have received a formal caution or are currently facing prosecution for a criminal offence you should also bring this to our attention given the “excepted” nature of the role. If you leave anything out it may affect your application. (Ex-Offenders Policy)

This information **will** be verified through an AccessNI **Disclosure Check (DC)** if you are considered to be the preferred candidate and are being offered the position. The DC will tell us about your criminal record history (and, if the post is regulated activity, if your name has been included on a Barred List). It is to make sure that those individuals who are considered a risk to vulnerable adults and/or children are not appointed. (Code of Practice)

The information received will be treated confidentially and will only be assessed alongside normal selection criteria to determine suitability for the position if you are considered to be the preferred candidate. A separate meeting will be held with you if clarification is required to discuss any issues around your disclosure before a final decision is reached. After the decision has been made the information will be destroyed.

Please complete the attached form which will only be opened if you are the preferred candidate (or selected volunteer), otherwise it will be destroyed confidentially in accordance with Data Protection regulations. Please return the form with your application, in a separate envelope. The form also asks you to give your written consent to the AccessNI Check and to agree to further enquiries being made relevant to the declaration, which will only be obtained if you are the preferred candidate.

If you do not consent we will not accept your application.

Applicants can also submit a separate statement of disclosure if they wish. This may include details such as the particular circumstances around the conviction(s); how circumstances may have changed; and what has been learnt from the experience. Applicants can contact the Northern Ireland Association for the Care and Rehabilitation of Offenders (NIACRO) for more information.

**Declaration of Criminal Convictions, Cautions and Bind-Over Orders**

**In Confidence**

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| **1.Have you been barred from working with vulnerable adults and therefore had your name placed on a Barred List? YES/ NO**  (if yes please give details) |

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| **2. Do you have any prosecutions pending? YES/NO**  (if yes please give details) |

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| **3. Have you ever been convicted at a court or cautioned by the police for any offence? YES/NO**  If yes, please list below details of all convictions, cautions, or bind-over orders. Give as much information as you can, including, if possible, the offence, the approximate date of the court hearing and the court which dealt with the matter. |

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| **4. Declaration of Abuse Investigation(s)**  Have you ever been the subject of an Adult or Child Abuse investigation which alleged that you were the perpetrator of any adult or child abuse? **YES/NO**  If yes, please list full details below including the name of police unit or HSC Trust involved in the investigation. If possible please provide the approximate date/s. |

**Declaration and Consent**

I declare that the information I have given is complete and accurate. I understand that I will be asked to complete an AccessNI Disclosure Certificate Application Form if I am considered to be the preferred candidate (or selected volunteer). I consent to the appropriate AccessNI check being made and I agree to enquiries relevant to this declaration.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Any surname previously known by:\_\_\_\_\_\_\_\_\_\_

Position applied for:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(please return in sealed envelope with application form)