

# Application form

404



Criminal Records Bureau

PO Box 110,  
Liverpool L69 3EF

Form Ref

F0055378620



MINISTRY OF DEFENCE  
EMPLOYMENT ASSURANCE (DISCLOSURE)  
ROOM 206, BUILDING 107, IMPHAL  
YORK, NORTH YORKSHIRE  
YO10 4AS

278620

This form can be used to apply for a CRB check and/or to register with the Independent Safeguarding Authority (ISA). If you are applying for both a CRB check and ISA registration on this form it must be for the same post. If not, two application forms must be completed. **APPLICANTS MUST COMPLETE SECTIONS a, b, c, d AND e ONLY. DO NOT COMPLETE SECTIONS w, x, y OR z.** If you require help in completing the form, you can call the CRB on 0870 90 90 811, visit our website on [www.crb.gov.uk](http://www.crb.gov.uk) or talk to the person who provided you with this form.

Failure to complete this form correctly will delay your application.

## YOU MUST

- Use **BLACK INK** throughout.
- Use **CAPITAL LETTERS** when completing the form.
- Complete all sections marked in **YELLOW** – if you do not, your form will be returned unprocessed and this will delay your application.
- Write clearly and insert only one character in each box.
- Put a line through a mistake, and correct it to the right.
- Mark choices in the box with a cross (X).
- Keep your signature(s) within the box provided.
- Provide all addresses where you have lived in the last 5 years. If you have lived overseas within this period please include these addresses.

## DO NOT

- Write over the edges of each box.
- Place stamps or stickers on the form.
- Staple anything to the form.
- Use correction fluid.
- Strike out a section that is not applicable. Please leave it blank.

## After you have completed sections a, b, c, d and e please return the form to the person who provided you with the form. They will then ask you to provide a range of documents to confirm your identity. A list of acceptable documents can be found on [www.crb.gov.uk/id](http://www.crb.gov.uk/id)

## Before you pass this form to the person who provided it to you, please ensure you have:

After you have completed sections a, b, c, d and e please return the form to the person who provided you with the form. They will then ask you to provide a range of documents to confirm your identity. A list of acceptable documents can be found on [www.crb.gov.uk/id](http://www.crb.gov.uk/id)

Before you pass this form to the person who provided it to you, please ensure you have:

## You must provide original documentation only; photocopies will not be accepted.

- You must provide **original documentation only**; photocopies will not be accepted.
- At least one document must confirm your **current name**, as recorded in section a.
- At least one document must confirm your **date of birth**, as recorded in section a.
- At least one document must confirm your **current address**, as recorded in section b, and be no older than 3 months.
- Wherever possible, where you hold a document containing a photograph from the approved identity document list, this should be submitted.

Completed all the **mandatory** fields, highlighted in yellow in sections a, b, d and e.

Provided all the addresses where you have lived in the last 5 years.

Signed the declaration in section e.

Application form.

Identity documents.

Continuation sheets (if you have used any), available from [www.crb.gov.uk](http://www.crb.gov.uk)

Payment (if you have been asked to provide this).

## The Criminal Records Bureau will refer the details provided on this application form to government and law enforcement bodies in accordance with any relevant legislation. The details provided to these bodies will be used for identifying possible matches to records held by them. Where such a match is established, data may be released to the CRB for inclusion on any certificate issued. The details provided on this form may be used to update the records held by the bodies specified above. The details provided on this application form may be used to verify your identity for authentication purposes.

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**a** applicant's details

1 title  mr  mrs  miss  ms  other

2 surname SMITH

3 forename(s) JOHN JAMES

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.crb.gov.uk](http://www.crb.gov.uk)

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

14 date of birth 06101962

15 gender male  female

16 place of birth (town) HARROGATE

17 place of birth (country) UNITED KINGDOM

18 e-mail address SMITHJJ@YAHOO.CO.UK

19 home telephone number 01423875448

20 do you have a national insurance number? no  yes  If 'yes' you must complete a21, if 'no' go to a22

21 national insurance number YZ123456A

22 do you hold a valid UK driving licence? no  yes  If 'yes' you must complete a23, if 'no' go to a24

23 driving licence number SMITH611777588KF

24 do you hold a valid passport? no  yes  If 'yes' you must complete a25, a26, and a27, if 'no' go to a28

25 passport number A4567891011

26 nationality BRITISH

27 country of issue ENGLAND

28 do you have an ISA registration number? no  yes  If 'yes' you must complete a29, if 'no' go to a31 **Do NOT COMPLETE 28-31**

29 ISA registration number

30 do you have a Scottish vetting & barring number? no  yes  if 'yes' you must complete a31, if 'no' go to section b

31 Scottish vetting & barring number

**registered body use only**

1. agent ref:

2. agent ref:

3. agent ref:

4. agent ref:

5. agent ref:

**b** current address

Please give details of your current address. This is the address to which all correspondence will be sent.

32 address 12 THE AVENUE

33 town/city HARROGATE

34 county NORTH YORKSHIRE

35 UK postcode HG1 3SW 36 country UNITED KINGDOM

37 at address since 031994

registered body use only

current address verified?

**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.crb.gov.uk](http://www.crb.gov.uk) If not applicable, go to section d.

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

**d** apply for registration with ISA

DO NOT COMPLETE SECTION D.



Independent Safeguarding Authority

50 are you applying for registration with ISA? no  yes  if 'yes' you must complete d51, d52, d53 and d54, as appropriate, if 'no' go to section e.

51 are you working or do you intend to work, paid or unpaid, with children  vulnerable adults  cross all that apply

52 are you working or do you intend to work, paid or unpaid, in controlled activity with children  vulnerable adults  cross all that apply

53 are you applying as a free of charge volunteer? no  yes  By placing a cross in the yes box, I confirm that I understand that I may be liable for payment at a later date as a result of a change in my employment status.

54 security information-name of first school

You may be asked to provide this, together with other personal information, when contacting the CRB or ISA for security reasons.

**e** declaration by the applicant

55 have you ever been convicted of a criminal offence or received a caution, reprimand or warning? no  yes

Applicant declaration (please sign within the box provided)

56 declaration by the applicant

John Smith

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 15072010

For help and assistance in completing this page please follow CRB guidance on the website - [www.crb.gov.uk](http://www.crb.gov.uk)  
 Complete all sections marked in BLUE - if you do not, this form will be returned unprocessed and this will delay this application.

**W** evidence of identity

SECTIONS W, X, Y, Z FOR COMPLETION BY CRB

58 name of evidence checker

59 have you established the true identity of the applicant, by examining a range of documents as set out in CRB guidance, and verified the information provided by the applicant in sections a and b, by completing the verification check boxes? no  yes

**X** apply for a CRB check



60 is the applicant applying for a CRB check? no  yes  If 'yes' you must complete x61 - x68 as appropriate, if 'no' go to section y

61 position applied for

62 organisation name

63 level of CRB check Please cross one box only standard  if crossed go to x67 enhanced  if crossed go to x64

64 are you entitled to know whether the applicant is registered to work with children? no  yes

65 are you entitled to know whether the applicant is registered to work with vulnerable adults? no  yes

66 does this position involve working with children or vulnerable adults at the applicant's home address? no  yes

67 application type application is for a new post holder   
 application is for an existing post holder   
 application is for an existing post holder who is being re-checked

68 is this application for a free of charge volunteer? no  yes  By placing a cross in the yes box, you confirm that the post meets the CRB definition for a free of charge volunteer application. Please note that CRB may recover the application fee if this box is marked in error and that this could result in the cancellation of your CRB registration. The answer to this question must be the same as for question d53, if completed.

**y** statement by registered person

69 registered body number 2 1 0 3 8 4 0 0 0 0 7 70 countersignatory number 2 1 0 3 8 4

71 do you have payment on account? no  yes  Please enclose payment if required

72 declaration by registered person

I confirm that the requisite documentation and information has been supplied and checked in accordance with CRB guidance. I declare that the information I have provided in support of the application is complete and true and understand that knowingly to make a false statement for this purpose may be a criminal offence. I certify that, where requested, an application for a CRB check is required for the purpose of asking an exempted question under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975; or for a prescribed purpose as defined in the Police Act 1997 (Criminal Records) Regulations 2002.

Signature of registered person (please sign within the box provided)

73 date of countersignature

**Z** CRB use only

74 payment type received cheque  postal order  multipayment  voucher

75 examined by