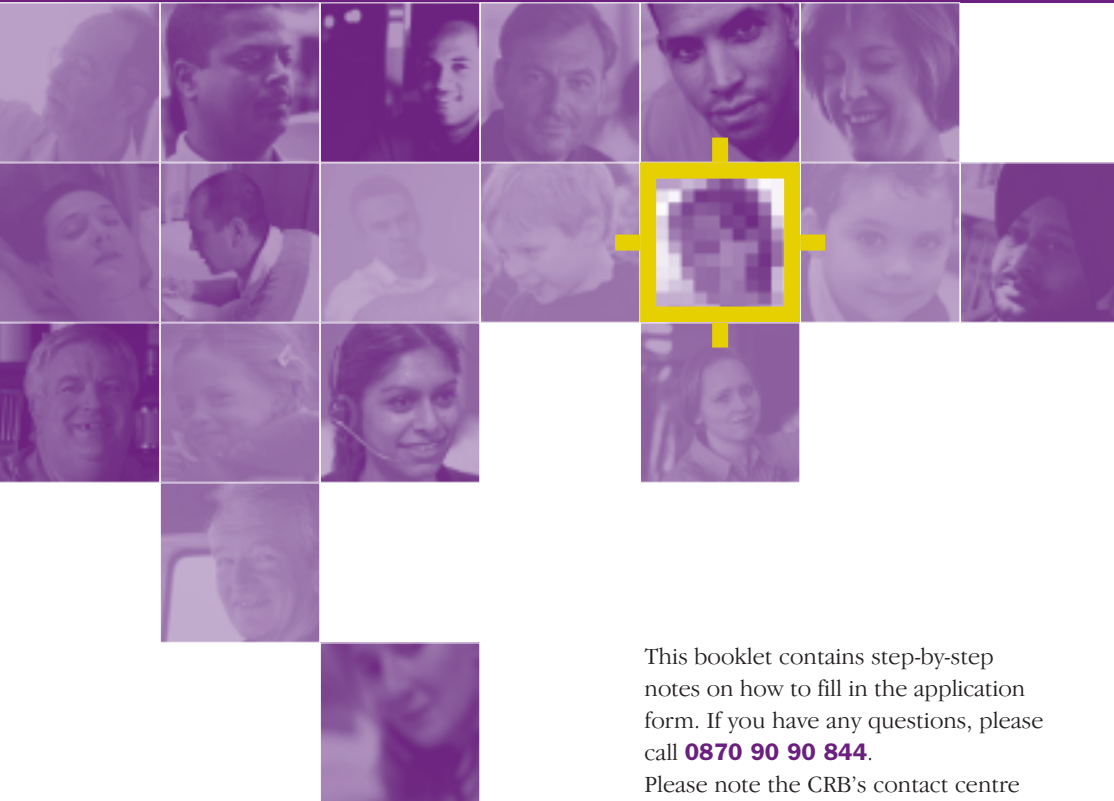


An Applicant's Guide to Completing the CRB Application Form

Some things to take into consideration



This booklet contains step-by-step notes on how to fill in the application form. If you have any questions, please call **0870 90 90 844**.

Please note the CRB's contact centre uses a language interpreting facility.

Minicom users call
0870 90 90 344.

You may be asked to use this booklet together with other guidance provided by the person who asked you to apply for a CRB check.

Do's

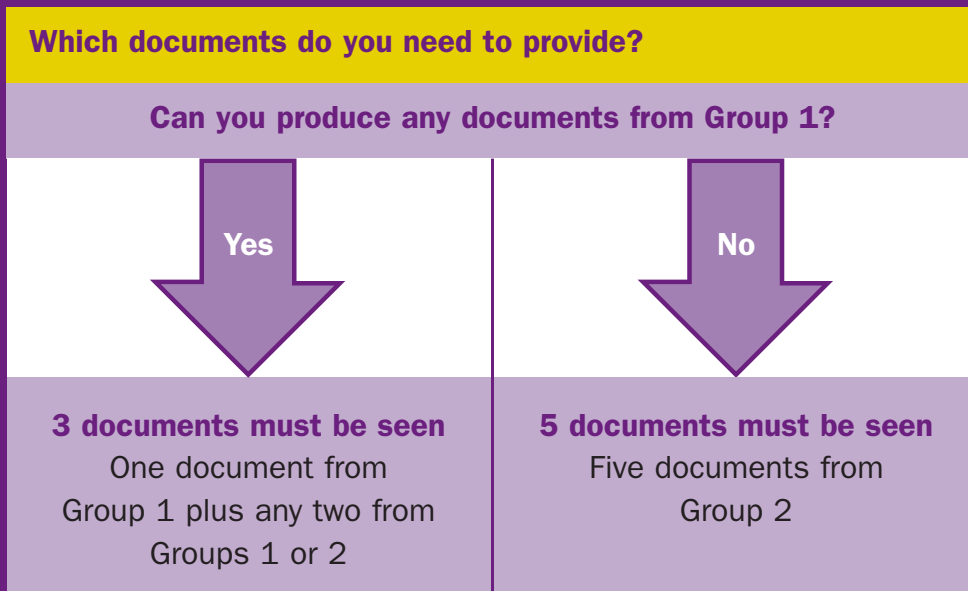
- Use **black ink** throughout and write clearly in **BLOCK CAPITALS** only.
- Use only one letter or number for each box.
- To correct a mistake on the form put a line through it and write the correction clearly to the right. If there is no space on the right, write the correction as close as possible.
- Leave an empty box between words, but **not** between postcodes or telephone numbers.
- Mark choices in the boxes indicated with a cross [X], not a tick.
- Be sure to sign the declaration at Section H, item 68, keeping all of your signature inside the box.
- Use the checklist on page 6 before sending to the person who asked you to apply for a Disclosure.

Don'ts

- Don't write over the edges of the box.
- Don't place any stamps or stickers on the form, i.e. featuring addresses or dates.
- Don't strike out a section of the form or state a field is not applicable. If it is not relevant to the application then please leave it blank.
- Don't staple any attachments to the form.
- Don't use correction fluid.
- Don't complete Sections E and F.
- Don't complete Sections X, Y and Z.
- Don't return the form to the CRB.

Confirming your identity

Your identity needs to be confirmed. You need to provide original documentation (no photocopies) to the person who asked you to complete this form. Please use the diagram below to determine which of these documents you need to provide.



List of Valid Identity Documents

Group 1

- **Passport** any nationality
- **UK Birth Certificate** issued within 12 months of date of birth – full or short form acceptable
- **UK issued Driving Licence** England/Wales/Scotland/Northern Ireland; either photocard or paper. A photocard is only valid if the individual presents it with the counterpart licence
- **EU Photo Identity Card** EU countries only
- **HM Forces ID Card**
- **UK Firearms Licence**

List of Valid Identity Documents (continued)

Group 2

- **Marriage Certificate**
- **Financial Statement**** e.g. pension, endowment, ISA
- **Birth Certificate**
- **Vehicle Registration Document**
- **UK P45/P60 Statement****
- **Mail Order Catalogue Statement***
- **Bank/Building Society Statement***
- **Court Claim Form**** documentation issued by Court Services
- **Utility Bill*** electricity, gas, water, telephone – inc. mobile phone contract/bill
- **Exam Certificate** e.g. GCSE, NVQ
- **TV Licence****
- **Addressed Payslip***
- **Credit Card Statement***
- **National Insurance Card**
- **Store Card Statement***
- **UK NHS Card**
- **Mortgage Statement****
- **Benefit Book** Child Allowance or Pension
- **Insurance Certificate****
- **Certificate of British Nationality**
- **Council Tax Statement****
- **Work Permit/Visa****
- **A document from UK Central/Local Government/Government Agency/Local Authority giving entitlement*** for example, from the Benefits Agency, the Employment Service or the Inland Revenue
- **Connexions Card**

*documentation should be less than three months old

**issued within past 12 months

Your step by step guide to filling in the form

The following guide will help you to complete your application form. Items marked in **YELLOW** are compulsory and therefore must be filled in. Items marked in **RED** are compulsory only if applicable to you. If you do not complete compulsory fields your form may be returned to you and will delay your application. Items not marked will assist the CRB to process your application.

Section A

Enter your current name and residential address.

Enter the month and year (for example 042000 for April 2000) you moved to your current address. If it was less than five years ago you will need to complete Section D.

Do not leave any spaces between letters or numbers for your postcode.

Enter the day, month, year (for example 10101964 for 10 October 1964) you were born.

A		Applicant's details	
1.	Title	Mr <input checked="" type="checkbox"/> Mrs <input checked="" type="checkbox"/> Miss <input checked="" type="checkbox"/> Ms <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/>	
2.	Surname	B L O G G S	
3.	Forename(s)	S U S A N	
4.	Current address	3 F L O W E R R O A D	
5.			
6.	Town/City	H A M P F O R D	
7.	County	C O U N T Y S H I R E	
8/9.	Postcode	C 2 3 8 T Y	At current address since 0 4 2 0 0 0 (month and year)
10/11.	Date of birth	1 0 1 0 1 9 6 4	Male <input checked="" type="checkbox"/> Female <input checked="" type="checkbox"/>
12.	National Insurance number	T Y 1 2 3 4 5 6 A	

Section B

Enter the title of the position you are applying for e.g. Teacher, Social Worker, Financial Adviser. If the job title does not make clear the nature of the work, be more specific (for example, Manager, Childcare Services).

Enter the name of the organisation offering the position.

B		Details of position for which Disclosure is being requested	
13.	Position applied for	T A X I D R I V E R	
14.	Organisation name	A A N D B C A B S	
	Organisation address		
15.	Address	S P E T A L R O A D	
16.			
17.	Town/City	A P P L E T O N	
18.	County	H E D G E S H I R E	
19.	Postcode	H 1 1 3 A B	

Section C

If you have entered 'Mrs' or 'Ms' in Section A, Item 1, please enter your surname at birth, even if it is the same as provided at Section A, Item 2.

Please provide details of any other names used at any time during your lifetime and the dates during which the names were used in Items 20-27. Use a continuation sheet if necessary. See inside back cover for details. If not applicable, please leave blank.

Complete Items 28-32 whether or not your country of birth is in the UK.

Please write your county/district of birth in full.

Do not leave any spaces between numbers when providing your telephone number.

Enter whether you would prefer to be called at home or work (if applicable), and a preferred time between 8.00am - 8.00pm weekdays or 10.00am - 5.00pm on Saturday. The CRB may use this number to contact you in relation to your application.

C		Additional personal details	
20.	Surname at birth (if different)	B R O W N	
21.	Used until	1 9 8 5	(year)
22.	Any other surname used	J O N E S	
23/24.	Used from	1 9 8 5	used to 1 9 8 8 year
25.	Any other forenames(s) used	S A R A H	
26/27.	Used from	1 9 7 4	used to 1 9 8 4 year
	Place of Birth	Please enter town/city names and county/district names in full as recorded on your Birth Certificate	
28.	Town/City	C R A W L E Y	
29.	County/District	W E S T S U S S E X	
30/31.	Born in the UK	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	If no, please state country
32.	Nationality	B R I T I S H	
33.	Home telephone number	0 1 2 3 4 5 6 7 8 9 0	
34.	Work telephone number	0 9 8 7 6 5 4 3 2 1 0	
35.	Preferred contact number and time	W O R K M O N - F R I	9 - 5

Section D

Please provide your 5-year continuous address history from the date the application form is signed. If your current address is less than 5-years old, please use a continuation sheet. You should include overseas addresses where necessary. There must be no gaps or overlapping in the addresses provided for this period. Please give full address details, including postcode and the dates at which you resided at these addresses. If you do not provide a full 5-year address history your form will be returned. See inside back cover for instructions.

Do not leave any spaces between letters or numbers for your postcode.

D		Previous addresses		Provide your most recent addresses where you have lived the last 5 years, use continuation sheet if necessary	
36.	Address	1 0 T U L I P P L A C E			
37.					
38.	Town/City	T O W N S V I L L E			
39.	County	Y O R K H A M P T O N			
40/41.	Postcode	T Y 2 3 A A	Country		
42/45.	Period at previous address	From date	0 4 1 9 9 9	To date	0 4 2 0 0 0 (month and year)

Section E No information required.

The CRB no longer requires this information to process your application.
Please leave this section blank.

E	Additional information	This information will help us to process your application more quickly	
46.	Current marital status	Single <input checked="" type="checkbox"/>	Married <input checked="" type="checkbox"/> Divorced <input checked="" type="checkbox"/> Widowed <input checked="" type="checkbox"/> Separated <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/>
47.	Number of financially dependent children under age 18	<input type="text"/> <input type="text"/>	
48/49.	Bank/Building Society account	Sort Code <input type="text"/> <input type="text"/> <input type="text"/>	Account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
50.	Employment status Cross ONE box only	Employed <input checked="" type="checkbox"/>	Self-employed <input checked="" type="checkbox"/> Part-time <input checked="" type="checkbox"/> Unemployed <input checked="" type="checkbox"/> Student <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/>
51.	Occupancy status Cross ONE box only	Owner occupier <input checked="" type="checkbox"/> Joint occupier <input checked="" type="checkbox"/> Living with parent <input checked="" type="checkbox"/> Renting <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/>	
52.	Mother's maiden name	<input type="text"/>	

Section F No information required.

The CRB no longer requires this information to process your application.
Please leave this section blank.

F	Referee details	Please provide details of an appropriate referee who has known you professionally or personally for at least 2 years	
53.	Title	Mr <input checked="" type="checkbox"/> Mrs <input checked="" type="checkbox"/> Miss <input checked="" type="checkbox"/> Ms <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/>	<input type="text"/>
54.	Referee surname	<input type="text"/>	
55.	Referee forename(s)	<input type="text"/>	
56.	Referee occupation	<input type="text"/>	
57.	Home address	<input type="text"/>	
58.		<input type="text"/>	
59.	Town/City	<input type="text"/>	
60.	County	<input type="text"/>	
61.	Postcode	<input type="text"/>	
62.	Home telephone number	<input type="text"/>	
63.	Relationship to applicant	Parent/Guardian <input checked="" type="checkbox"/>	Other <input checked="" type="checkbox"/>
64.	Number of years known	<input type="text"/> <input type="text"/>	

Section G

Pre-printed details in this section will indicate whether payment has already been made for this application, and the method by which payment has been, or will be, made. If you are unsure whether you are required to make a payment, please check with the person who asked you to apply for a CRB check.

If you are required to make a payment and are paying by cheque, please make it payable to the 'Criminal Records Bureau' and write your form reference number (located on the front of the form) on the reverse. Pass the cheque with your completed form and your original identity documents to the person who asked you to apply for the CRB check. Do not use staples to attach the cheque to the form.

G	Payment
65.	

Section H



Place a cross in the box applicable to you. If you are unsure how to answer this question, advice can be sought from Nacro (an independent voluntary organisation working to prevent crime). Tel: 020 7840 6464 or email: helpline@nacro.org.uk

If you have used a continuation sheet, do not forget to put a cross in the box

Sign the form. If you do not it will be returned to you.

The CRB no longer requires a signature in Item 69, please leave this blank.

Enter the date you completed the form.

H	Applicant declaration and consent	
66.	After you have checked the information provided in Sections A-G, please complete Section H and sign the application form in the space(s) provided. Do you have any unspent criminal convictions? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	
67.	Please cross this box if you have supplied additional information with this application <input checked="" type="checkbox"/>	
68.	Declaration by Applicant 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 is a criminal offence.	Signature of applicant (please sign in the box provided) 
69.	Consent of Applicant I consent to the CRB checking the details I have provided in support of this application against the data sources specified in the notes for guidance, in order to verify my identity and process this application. These details may be recorded and used to assist other organisations for identity verification purposes,	Signature of applicant to indicate consent (please sign in the box provided) 
70.	<input type="text" value="15082002"/> After you have signed this form please send it to the person who asked you to apply for a Disclosure – DO NOT return the form to the CRB at this stage.	

Do not complete Sections X, Y or Z.

Please refer to the checklist before sending the form to the person who asked you to apply for a CRB check.

Use of a continuation sheet

- Use a white A4 sheet of paper, clearly headed 'Continuation Sheet'.
- Use **black ink** and write clearly in **BLOCK CAPITALS** only.
- Write your form reference number (located on the front of the form), current name and address clearly at the top of the sheet.
- To supply additional information for Section C or D, please provide the information in the following format.
- Do not staple the continuation sheet to the form.

CONTINUATION SHEET
FORM REF: F12345678910
NAME: SUSAN BLOGGS
ADDRESS: 3 FLOWER ROAD,
HAMPFORD,
COUNTYSHIRE L23 8TY

ITEM NO.

22	SURNAME USED:	SMITH
23	USED FROM:	1998
24	USED TO:	2000
36-37	ADDRESS:	1 HIGH ST
38	TOWN/CITY:	TOWNSVILLE
39	COUNTY:	COUNTYSHIRE
40	POSTCODE:	L01 112
41	COUNTRY:	UK
42	FROM:	031995
43	TO:	041999

Checklist

Before you hand your form in, complete this last minute check.

- Have you provided all addresses for the last five years?
(There should be no gaps in your dates.)
- If you have used a continuation sheet, have you included your form reference number (located on the front of the form) and crossed the box on the form?
(Section H, Item 67.)
- Have you signed the form? (Section H, Item 68.)

What Happens Next

You should pass your

- Application form
- Documents as evidence of identity
- Continuation sheet (if used)
- Payment (if required)

to the person who has asked you to apply for a CRB check, who will then check your documents and complete Sections X and Y, and send it to the CRB who completes Section Z.

Do not send these documents to the CRB.

CRB Checks - Standard and Enhanced

Standard Check

Standard checks are primarily for posts that involve working with children or vulnerable adults. They may also be issued for people entering certain professions, such as members of the legal and accountancy professions. Standard checks contain:

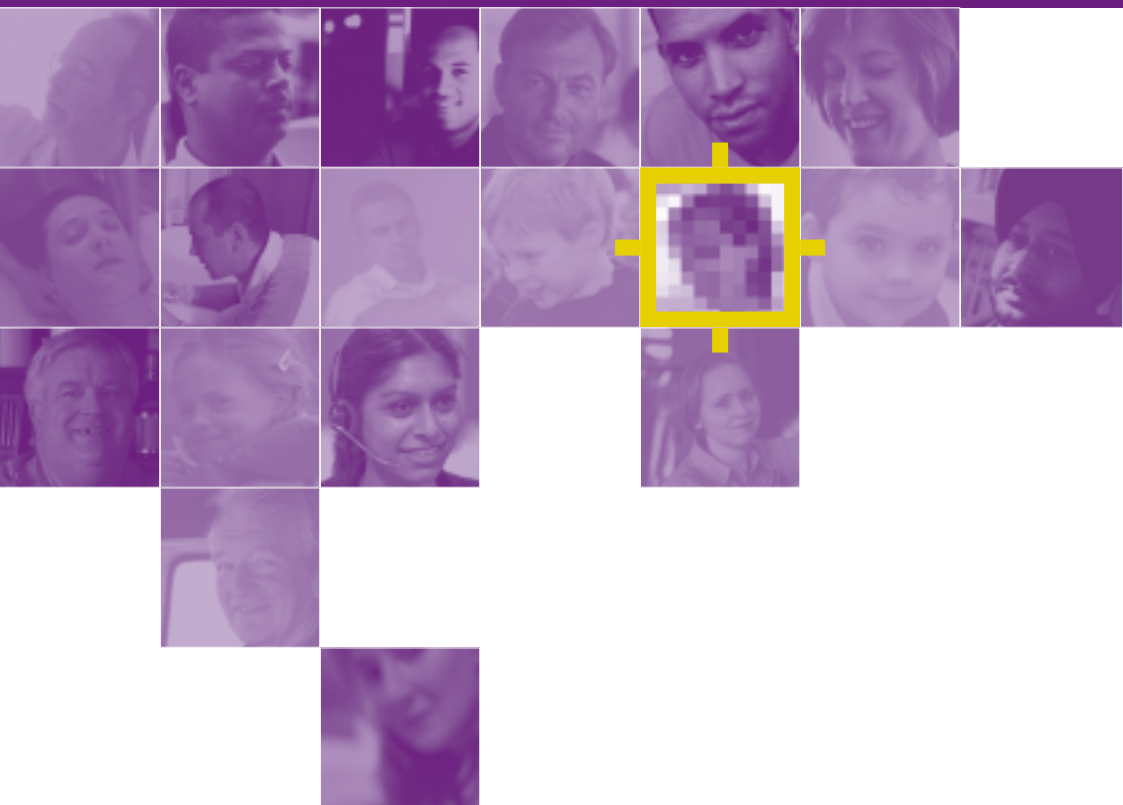
- details of all convictions, cautions, reprimands and warnings held on the Police National Computer (PNC);

and if the position involves working with children or vulnerable adults and the relevant boxes have been marked on the application form to indicate this:

- information from the Protection of Children Act List (PoCA);
- information from the Protection of Vulnerable Adults List (POVA); and
- information held by the DfES under Section 142 of the Education Act 2002 of those considered unsuitable or banned from working with children.

Enhanced Check

Enhanced checks are for posts involving a far greater degree of contact with children or vulnerable adults. In general, the type of work will involve regularly caring for, supervising, training or being in sole charge of such people. Examples include a Teacher, Scout or Guide leader. They are also issued for certain statutory purposes such as gaming and lottery licences. Enhanced checks contain the same information as Standard checks but with the addition of local police force information considered relevant by Chief Police Officer(s).



Contact details:

Address: PO Box 110, Liverpool L69 3EF
Application Line: 0870 90 90 844
Minicom: 0870 90 90 344
Website: www.disclosure.gov.uk