

# CONFIDENTIAL DECLARATION FORM (Revised May 2018)

We are very aware of the sensitive and confidential nature of the information contained in this document and wish to assure you that it will be treated in the utmost confidence and handled strictly according to our Policy on Secure Storage, Handling, Retention and Disposal of Disclosures Information.

It will be seen **only by** the Diocesan Registered Person who applies for the Access N.I. Enhanced Disclosure.

You have applied for a role which is a Regulated Activity as defined by the Safeguarding Vulnerable Groups (N.I.) Order 2007 and also falls within the definition of an "excepted" position as provided by the Rehabilitation of Offenders (Exceptions) Order (N.I.) 1979, therefore ALL convictions including SPENT convictions MUST be disclosed.

**Having a criminal record will not necessarily bar you from working within the Catholic community.** This will depend on the nature of the position and the circumstances and background of your offences. This information will be verified through an Access N.I. Enhanced Disclosure.

**Please complete below:**

1.	Surname: _____ (Block Capitals)
2.	All Forenames: _____ (Block Capitals)
3.	Date of Birth ____/____/____
4.	Male/Female: _____
5.	Place of Birth (Town/County and Country) _____
6.	Present Address _____ _____ _____ Post Code: _____
7.	Contact Details: Tel. No. _____ Email: _____

Note to Applicant: Ensure that this **form is completed in a confidential place, sealed and attached to the ID Verification Form.** Both these forms must be forwarded to:

**The Registered Person**  
Catholic Church Northern Dioceses Vetting Office, Good Shepherd Centre,  
511 Ormeau Road, Belfast BT7 3GS.

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The purpose of the following questions are solely to assess whether you pose a risk to Children or Vulnerable Adults. If, for any reason, you answer YES to these questions, it may not automatically rule you out of the selection process. You will have the opportunity to fully discuss the circumstances with us at a face to face meeting in a confidential manner.

**8. Have you ever been convicted or received an official caution for a criminal offence, other than minor road traffic offences? If Yes, please give details below:**

Date of Conviction	Offence	Sentence

**9. Have you ever been or are you the subject of a criminal investigation involving sexual offences or child abuse other than as the victim?**

**10. Are you the subject of any possible pending prosecutions, other than minor road traffic offences? If Yes, please give details below:**

**Declaration**

I am committed to protecting and safeguarding children, young people and vulnerable adults from abuse.

<b>Statements</b>	Please tick if you have read and understood these statements
I understand that I will be working closely with children and or vulnerable adults and that a "Barred list check" is required. I give my consent to proceed with a Barred list check.	
I understand that to knowingly give false information or to omit information will be considered as a breach of trust.	
I understand that my confidential documentation will be retained for 90 days after the certificate has been issued. After that period all documentation will be destroyed.	
The information I have given on this form is correct.	

Role you have applied for: \_\_\_\_\_

Please state the Parish who has asked you to take up a role: \_\_\_\_\_

Please state DIOCESE: \_\_\_\_\_  
(e.g.: Armagh, Clogher, Derry, Down & Connor, Dromore or Kilmore)

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's name: \_\_\_\_\_ (please print block capitals)