Self-Disclosure Form for Declaring Convictions

The post you have applied for requires a basic, standard or enhanced disclosure or where your normal duties include regulated work and requires a PVG disclosure in accordance with at least one of the following pieces of legislation:

* Rehabilitation of Offenders Act 1974 (as amended)
* Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2013 (as amended)
* Protection of Vulnerable Groups (Scotland) Act 2007 (as amended)
* Police Act 1997 (as amended)

You are required to disclose certain convictions below, but you should not tell us about any convictions which were gained before the age of 12. Having a criminal record will not necessarily be a bar to working or volunteering with us. We will consider any information disclosed fairly and in accordance with the requirements of Rehabilitation of Offenders Act 1974.

**Data Protection Act 2018 and GDPR**

The information given in this form will be treated in strict confidence. When completed, the document contains sensitive personal data as defined by the Data Protection Act and GDPR which will be used only for the purpose it was requested and handled in accordance with the Act.

**Unspent Convictions**

You must complete this section.

Do you have any unspent convictions? Yes/No

If you have selected yes, please provide details below.

All unspent convictions must be disclosed. Please provide details of any unspent convictions here:

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Court** | **Offence** | **Disposal** |
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**Spent Convictions**

This section should be completed following the guidance below. If you will be applying for a standard, enhanced or PVG disclosure you should not tell us about any convictions before the age of 12. Do not complete this section if you are applying for a basic disclosure.

The 2020 amendment order gives two lists of offences that may be disclosed for an extended period. For more information on these visit the Scottish Government’s website for guidance.

* Offences that must be disclosed –

<https://www.mygov.scot/offences-always-disclosed/>

* Offences that must be disclosed according to the rules –

<https://www.mygov.scot/offences-disclosed-rules/>

If you have any convictions for offenses detailed in these lists which are now considered to be spent in normal circumstances, you should not disclose these on this form, however, please be aware that if you are applying for Standard, Enhanced or PVG disclosure, this information can be released on your certificate for longer than the normal rehabilitation period. Disclosure Scotland will notify you if you have any convictions which fall under this extended disclosure period as you can (if you wish) apply to have this information removed from your disclosure. Where such information is released, we will discuss this with you when we receive our copy of your disclosure. Please note that applying to have this information removed does not guarantee its removal, the final decision on this will be made by a Sheriff or using the review mechanism when it becomes available. For further guidance on this, visit the Disclosure Scotland section of the Scottish Government’s website – <https://www.mygov.scot/convictions-highr-disclosures/>

If you have any convictions that must be disclosed, and the extended disclosure period has not passed please provide information here –

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| --- | --- | --- | --- |
| **Date** | **Court** | **Offence** | **Disposal** |
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**Barred List**

This section should only be completed if you will be applying for PVG disclosure or enhanced disclosure with list checks. Do not complete this section if you are applying for basic, standard, or enhanced disclosure without list checks.

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| --- | --- |
| I understand that my role involves regulated work and confirm that I am not barred from the relevant regulated work group(s). | |
| Signed | Date |

**Declaration**

|  |  |
| --- | --- |
| I certify that the information contained in this form is true and complete to the best of my knowledge and belief. I understand that any false information or omission in the information I have given may lead to immediate suspension or termination of my volunteering or employment with the organisation.  I confirm that I have read and understood this declaration. | |
| **Full Name** |  |
| **Address** |  |
| **Signed** |  |
| **Date** |  |