**Declaration of Criminal Convictions Form A**

**For posts subject to Standard criminal conviction checks & PVG checks with Disclosure Scotland**

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| Please state post applied: |

Due to the nature of the work for which you are applying this post is exempt as per the provision of the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2003 as amended.

**You must therefore reveal the full information about all convictions which for other purposes are ‘spent’ under the provision of the act along with details of any criminal proceedings pending against you.**

Please indicate in the box below whether or not you have any criminal convictions or proceedings pending against you.

Any failure to disclose all convictions, or failure to give details of any criminal proceedings pending against you, could invalidate your application, or in the event of employment, could result in dismissal in accordance with the Disciplinary Procedure.

Any information given will be kept in strictest confidence and will be considered only in relation to your application for this post and, if successful, your continued employment. Please note that any information provided about convictions which are deemed irrelevant to the post for which you are applying will be disregarded.

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| Have you any convictions? Yes No  Are there any criminal proceedings pending against you? Yes No  If you have answered **Yes** to either question please provide details and dates in the space provided below:  **Candidate statement**   * I confirm I have not withheld any information which may affect my application * I confirm I understand any false, misleading or omission of information may lead to my dismissal * I confirm I understand the information supplied will be subject to checks   Full Name (Please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Previous Name(s) (where applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |