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| C:\Users\manager\Desktop\Brookfields_Logo_2014 640.jpg | **DISCLOSURE AND BARRING SERVICE (DBS)CERTIFICATE AND STATUS CHECK CANDIDATE****CONSENT FORM** |

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| --- | --- |
| **Candidate’s Name:** |  |
| **Date of Birth:** |  |
| **Post applied for** |  |
| **Team / School:** | BROOKFIELDS SCHOOL |
| **Directorate:** | THE SHAW EDUCATION TRUST |

I consent to Brookfields School accessing my on-line Disclosure and Barring Update Service Account to perform a Status Check, in order to progress my application for employment/ casual/ voluntary. I consent to Brookfields School making a copy of my DBS Status Check.

If successful in my application for employment / work, I consent that, during my employment / casual work, the Academy may carry out periodic Status Checks of my on-line account, as stated in the Acadamies Disclosure and Barring Service Criminal Records Checks and Enhanced DBS Checks for Regulated Activity (Employment) Practice Guide.

I understand that a copy of the DBS Certificate and Status Check will be stored, retained and destroyed in accordance with the Academies Policy on Storage and Retention of Disclosure Information.

\* *= delete as necessary*

Signed: …………………………………………… Dated: …………………

 (Candidate)

**Instruction to Officer viewing the DBS Certificate:**

Please ensure that the candidate has completed this form prior to viewing the DBS Certificate and undertaking the on-line Status Check. You must also complete the Disclosure and Barring Service Criminal Record and Barred List(s) Check and Status Check Record Form.