

GUERNSEY VETTING BUREAU DECLARATION

Please submit a signed declaration form with each DBS Disclosure Application.

ORGANISATION DETAILS

Organisation Name:	GVB Registration Number:
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APPLICATION DETAILS

Applicant Name:
Job Title:
DBS Disclosure Form Reference Number:

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Employment Sector	Child Workforce	
	Adult Workforce	
	Child and Adult Workforce	
	Other Workforce	
Disclosure Level Eligibility:	Enhanced with Barred List	
	Enhanced	
	Standard	
Job Status	Voluntary	
	Paid Employee	

ID VERIFICATION DETAILS

Documents Seen	
1.	2.
3.	4.
5.	

I confirm that I have seen original documentation and as far as reasonably possible have verified the identity of the applicant. Further that I have advised the applicant about how their personal data will be used by the DBS by making them aware of the DBS privacy policy at <https://www.gov.uk/government/publications/dbs-privacy-policies>

ID Verifier Name:	Contact Telephone Number:
Date:	Signature:

APPLICANT DECLARATION

I have read the Standard/Enhanced Check Privacy Policy for Applicants <https://www.gov.uk/government/publications/dbs-privacy-policies> and I understand how DBS will process my personal data and the options available to me for submitting an application.

I agree that my details given on the DBS Application form can be held by the GVB as Umbrella Body operated by the States of Guernsey Committee for Home Affairs. These details will be processed and held on computer for administration purposes only in accordance with the Data Protection (Bailiwick of Guernsey) Law 2017.

Signature: _____ **Date:** _____