

Determination of the form and manner of an application under sections 113A(1)(a); 113B(1)(a); 114(1)(a); and 116(1)(a) of the Police Act 1997

Scottish Ministers determine that the form and manner of an application to Disclosure Scotland for:

- a criminal record certificate (standard disclosure) under section 113A(1)(a) of the Police Act 1997;
- an enhanced criminal record certificate (enhanced disclosure) under section 113B(1)(a) of the Police Act 1997;
- a criminal record certificate: Crown employment under section 114(1)(a) of the Police Act 1997; and
- an enhanced criminal record certificate: judicial appointments and Crown employment under section 116(1)(a) of the Police Act 1997

is made on paper.

The form and manner of the application is determined in Annex 1.

This is the form and manner for paper applications under sections 113A(1)(a), 113B(1)(a), 114(1)(a) and 116(1)(a) of the Police Act 1997. This form is published for determination purposes only and as such this form cannot be downloaded for use.

ANNEX 1

PROTECT – PERSONAL (WHEN COMPLETED)

Countersignature

PART E Countersignature - To be completed by the Countersignatory (Read Note E). For basic applications paid for by invoice, complete E8 to E12 and E20/E21 only.

Role Details (Excluding Basic Applications)

E1 Organisation Name

E2

E3 Position Applied For

E4

Exempted Question/ Prescribed Purpose (Excluding Basic Applications)

E5 Do you confirm that the certificate is required for the purposes of an Exempted Question? Yes No

E6 Do you confirm that the certificate is required for a Prescribed Purpose? Yes No

List Searchee (Excluding Basic Applications)

E7 Does the position qualify for the inclusion of suitability information relating to children? Yes No

E8 Does the position qualify for the inclusion of suitability information relating to protected adults? Yes No

Registered Body or Responsible Body Details

E9 Registered Body Name

E10 Registered Body/Sub Account Code (Code of account to be invoiced.)

E11 Countersignatory Name

E12 Countersignatory Code

Confirmation of Identity (Excluding Basic Applications)

The person countersigning must satisfy themselves as to the identity of the Applicant. A minimum of three forms of identity must be checked; if possible, one of them should be photographic. These should confirm the name, the date of birth and the current Home Address of the Applicant. Cross the appropriate boxes below to confirm what has been checked.

E13 Birth Certificate Passport Driving Licence (with photograph) Driving Licence (without photograph) National ID Card National Entitlement Card Other

If 'Other' then please state the form of identification seen.

E14

E15

E16 Authentication Reference Number

Countersigning on Behalf of Another Organisation (Excluding Basic Applications)

E17 Are you countersigning this application on behalf of another organisation? Yes No If 'Yes', supply name of organisation below.

E18 Organisation Name

E19

Declaration

I understand the following:

- Disclosure Scotland will use the information I have given to check and process this application. It will also use it for the purposes of the prevention or detection of crime and for other related purposes.
- Disclosure Scotland may pass the information to other Government departments or organisations, the police and other law enforcement agencies for the purposes of the prevention and detection of crime, of the apprehension and prosecution of offenders and for other related purposes.

I confirm that the information I have supplied is complete and correct. I understand that to knowingly make a false statement in this application is a criminal offence. I will give any additional information that may be required to verify the information given and will immediately notify any changes to this information.

E20/E21 Signature: _____ Signature Date: ____ / ____ / ____

The signature you supply here will be checked against the sample you provided at registration.

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PROTECT – PERSONAL (WHEN COMPLETED)

Disclosure SCOTLAND Police Act Disclosure Application

FOR OFFICIAL USE ONLY

*PLEASE REFER TO THE ACCOMPANYING GUIDANCE NOTES AS YOU COMPLETE THE FORM.
 *Please print in CAPITAL letters within the white boxes and do not make a mark on any other part of the form. We recommend you use blue or black ink.
 *Applicants should complete PARTS A, B, and C on pages 1, 2, and 3 of the form which are coloured blue. The Applicant may also have to complete PART D depending on whether or not they are paying for the Disclosure. Please check payment arrangements before completing PART D.
 *Mandatory fields are highlighted in yellow. You must provide information in these fields or your application will be delayed.
 *Please make a note of the Barcode Number at the top to assist with any future query.

PART A Type of Application (Read Note A)

A1 Basic Standard Enhanced Cross (X) one box only.

PART B Personal Details (Read Note B)

Name(s)

B1 Mr Mrs Ms Miss Other

B2 Present Surname

B3 Present Forename(s)

B4

B5 Are you now, have you ever been, or were you at birth known by a different name? Yes No If 'Yes', enter details below.

B6 Surname

B7 Forename(s)

B8

B9 Surname

B10 Forename(s)

B11

B12 If you require more space use a separate piece of paper and cross (X) this box.

B13 Mother's Maiden or Family Name

Birth Details

B14/B15 Date of Birth: ____ / ____ / ____ Gender: Male Female

B16 Town of Birth

B17 Country of Birth

B18 Nationality

Additional Information

B19 Do you have a UK National Insurance Number? Yes No If 'Yes', enter details below.

B20 National Insurance No. _____

B21 Do you have a Passport? Yes No If 'Yes', enter details below.

B22 Full Passport No. _____

B23 Country of Issue

B24 Do you have a Driving Licence? Yes No If 'Yes', enter details below.

B25 Driving Licence No. _____

B26 Country of Issue

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ANNEX 1

PROTECT – PERSONAL (WHEN COMPLETED)

Additional Information, Contact Details & Address History

Additional Information continued

B27 Do you have a National Identity Card? Yes No If 'Yes', enter details below.

B28 National Identity Card No.

B29 Country of Issue

B30 National Entitlement Card No.

B31 PVG Scheme ID

B32 Electricity Supplier No.

Contact Details

B33 Day Contact No.

B34 Evening Contact No.

B35 Email Address

B36

Current Address This is the address which will be printed on the applicant's certificate and to which the certificate will be sent.

B37 Address (Number, Street)

B38

B39 Post Town

B40 County

B41/B42 Post Code Resident From / /

B43 Country

Address History Please provide your address history in the last five years. (Most recent first, excluding current address.)

B44 Address (Number, Street)

B45

B46 Post Town

B47 County

B48/B49 Post Code Resident From / /

B50 Country

B51 Address (Number, Street)

B52

B53 Post Town

B54 County

B55/B56 Post Code Resident From / /

B57 Country

B58 If you require more space use a separate piece of paper and cross (X) this box.

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PROTECT – PERSONAL (WHEN COMPLETED)

Declaration and Payment

PART C Declaration (Read Note C)

I understand the following:

- Disclosure Scotland will use the information I have given to verify my identity and to check and process my application. Disclosure Scotland will use this information for the purposes of the prevention or detection of crime and for other related purposes.
- Disclosure Scotland may pass the information it holds about me to other Government departments or organisations, the police and other law enforcement agencies for the purposes of the prevention and detection of crime, of the apprehension and prosecution of offenders and for other related purposes.

I declare that the information I have given is complete and correct. I understand that to knowingly make a false statement in this application is a criminal offence. I will give any additional information that may be required to verify the information given and will immediately notify any changes to this information.

C1/D2 Applicant's Signature PLEASE KEEP SIGNATURE WITHIN BOX Signature Date / /

PART D Payment (Read Note D)

If you, as the Applicant, are paying for this application, complete PART D before forwarding the form to the person who will be countersigning it. If you are not paying for it, leave PART D blank and forward the form directly to them.

D1 If you are the Registered/Responsible Body and you wish this application to be included on your invoice please cross (X) this box and complete D2.

D2 Method of Payment

Registered Body/ Responsible Body Invoice Cheque VISA Master Card Maestro
 Solo VISA Electron VISA Debit/ Delta Postal Order Voucher

Please make cheques payable to 'Disclosure Scotland'. We recommend the cheque is completed in blue or black ink.

Credit/Debit Card Payments

D3 Card Number This is the large number written across the middle of your card. Do not leave blank spaces.

D4/D5 Expiry Date / Issue Number (if applicable)

D6 Name of Cardholder

D7/D8 Cardholder's Signature PLEASE KEEP SIGNATURE WITHIN BOX Signature Date / /

Voucher Payments

D9 Voucher Number

COUNTERSIGNED APPLICATIONS - send completed application forms to the person who will be countersigning your application.
 NON-COUNTERSIGNED APPLICATIONS - send completed application forms to: Disclosure Scotland, PO BOX No. 250, GLASGOW G51 1YU.

FOR DISCLOSURE SCOTLAND USE ONLY. DO NOT WRITE BELOW THIS LINE.

Correct Payment Amount # Sort Code

Account Number Cheque Number

Other

Initials

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