

Initial information form for a DBS applicant

We are pleased to be able to offer online DBS¹ checks in partnership with Gwynedd Council alongside our existing paper forms. Please indicate below how you wish to proceed with your application. At the end of both options, you will receive a paper DBS certificate directly from the DBS.

I wish to complete the DBS checking process:

- A. Online (You must provide your email address a link and password will be sent directly to you to enable you to complete your DBS application electronically). You will still need to meet with a Panel verifier to check your identity documents.
- B. Using the paper form (a DBS paper application form will be sent to your postal address or to your church secretary or safeguarding contact)

please complete the rest of this form for both option A and B.

Applicant's Details

Full name of Applicant	
Email	
phone number	
Postal address	

Church Details

Name of the church (Including village/town) :

Denomination:

Name and contact details of church safeguarding contact or secretary:

Does this Church have organised activities with:-	Children 🛛	Vulnerable Adults D ?
Email address:	Phone number:	
Address:		
Name:		

i.e., Sunday School, youth work, regular pastoral visiting, luncheon club etc. (We can only do checks for church trustees if the church has organised activities with vulnerable groups)

Name of local identity verifier (if known):

¹ The initial part of the Gwynedd process can be through the medium of Welsh or English but once the applicant reaches the online form the process is in English. **Please complete both sides of this form**



Details of the role / voluntary work

To ensure that this role is eligible for a DBS check and to ascertain the correct level of DBS check, please provide information regarding your role by completing and ticking the boxes below: Please note: 'work' means paid work or volunteering.

1. Your job title/ position / role(s) within the church						
2. Will your role involve working with :- Children D Vulnerable Adults ?						
3. Pleas	e give a brief outline below of your work v	vith children and / or v	ulnerable ad	lults.		
4. How f	frequently do you carry out this role? e.g.,	weekly, monthly, occas	ionally etc.			
	DREN'S WORKERS:					
•	u be under constant supervision* whilst working	•		No 🗆		
	pervision means that an individual responsible for hroughout the activity. Not that more than one additional section on the section of the			sciosure for the role		
	lease provide the name of the person supervi			er text.		
ii. Will this	s role include personal care i.e., helping/prom	pting young/ ill or disabl	ed children v	vith eating/		
	g /washing/toileting?	1 3 7 3 3	Yes□	No□		
iii. Will th	e role involve driving children?		Yes□	No□		
6. VULN	IERABLE ADULT WORKERS:					
	he role involve:-					
Person	al care e.g., help with toileting, dressing or fe	eding/prompting to eat?	Yes⊡	No□		
Assisting	with money /shopping?		Yes□	No□		
	ting an adult for health, personal or social ca g someone from a residential home etc.)?	re (e.g., doctors, hospita	al appointmei Yes ⊡	nts, or No □		
	he role involve working with children or vu ase provide details of the work done at your home	•	e applicant's Yes⊡) home? No⊡		
8. Is this	s role	Volunta	ary 🗆	Paid 🛛 ?		
9. Is this	s DBS check for:-					
i.	a new role/post holder					
ii.	an exisiting post holder					
iii.	an exisiting post holder being re-checked					