Form 2 Identity verification for DBS application



Since May 2023, applicants have been able to choose to complete a DBS application online or by using a paper form. Those applicants who have followed the online process (or completed a JotForm prior to a paper form) have already submitted information about their role, therefore the verifier only needs to complete this form and check the applicant's identity documents.

The verifier should see at least <u>3 documents</u> following DBS guidelines, and note the details below.

APPLICANT DETAILS

Full name of Applicant				
Date of birth				
Email and phone number				
Home Address				
Role / job title				
Name of the church including village/town/ denomination				
Is the applicant a United Kingc	lom national?	Yes□	No□	

The applicant has completed their DBS application form:

Α.	Online 🗌	B. Using the paper form	please indicate the date the form was sent to the Panel's office (if not attached)
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IDENTITY VERIFICATION

You should see at least three documents. At least one should be a primary identity document from group 1. e.g. passport / driving licence / original birth certificate (issued within 12 months of birth)/ adoption certificate. If the passport is used – include the nationality of the applicant. For driving licenses – please note the country of issue.

See the Panel or DBS website for guidance and a full list of acceptable documents: <u>https://www.gov.uk/government/publications/dbs-identity-checking-guidelines/id-checking-guidelines-for-</u> standardenhanced-dbs-check-applications-from-1-july-2021

	Document type	Number / details	Publication date/
			Valid from
1			
2			
3			
4			

VERIFIERS STATEMENT:

I confirm that I have checked the current address, date of birth, name and address history and confirmed the identity of the applicant, by viewing and verifying at least 3 original documents as listed above. I confirm that the information provided to support this claim is correct and I understand that knowingly making a false statement for this purpose is a criminal offence.

Signature:

Verifier's name :

Date: