

DECLARATION FORM

Please complete all parts of this form in full:

FORENAME(S):	MR DAVID A. ALUKO
SURNAME:	ALUKO
POST TITLE:	HCA
POST REF NO:	

Guidance for applicants

The position you have applied for is exempt from the Rehabilitation of Offenders Act 1974 (as amended in England and Wales)

When Cheshire & Wirral Partnership NHS Foundation Trust (CWP) is assessing your character and suitability for any such appointment, it is legally permitted to ask for and consider any information relating to unspent (current) and spent (old) criminal convictions, police cautions, final warnings or reprimands which are not protected (or filtered out) by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2013.

You are not legally obliged to declare any convictions or cautions which are protected under the Exceptions Order. Employers must not ask for, or consider any such information as part of their recruitment process. Before completing this form it will be important for you to read the useful guidance section on page two which provides additional advice about the type of criminal history information you must declare.

Where relevant to the role, the organisation may also ask you to provide any information about any investigations and/or formal action taken against you by a regulatory or licencing body which may have had an impact on your professional registration and/or fitness to practise in your chosen profession.

Any information you declare when completing this form will be verified by undertaking a follow-up check with the relevant body. It will also include carrying out a standard or enhanced disclosure through the Disclosure and Barring Services (known as a DBS check).

Enhanced disclosures may also include other non-conviction information which may be held on central police databases, where this is regarded as relevant to the position you are applying for. If the position has, in addition, been identified as a 'regulated activity' under the Safeguarding Vulnerable Groups Act 2006 (as amended by the Protection of Freedoms Act 2012), the enhanced disclosure will also include any information that may be held about you on the children's and/or adults barred list(s).

Our fair recruitment promise

CWP aims to promote equality of opportunity and is committed to treating all applicants for positions fairly and on merit regardless of ethnicity, disability, age, gender or gender re-assignment, religion or belief, sexual orientation, pregnancy or maternity, marriage or civil partnership.

The organisation does not discriminate unfairly against applicants on the basis of criminal conviction or other such information declared. If we believe that the information you have declared is relevant to the position you are applying for, we will discuss this with you prior to making our final recruitment decision. If information is not raised with you, this is because we do not believe that this should be taken into account. In any event, you remain free to discuss the matter with the recruiting manager or human resources department should you wish to do so.

DECLARATION FORM

All information will be examined on a case-by-case basis alongside the full range of information we gain about you as part of our recruitment process. It is important to stress that answering yes to any of the questions in the attached form does not mean that you will be prevented from taking up an appointment in the NHS.

How will my information be used?

The information that you provide in this declaration form will be processed in accordance with the Data Protection Act 1998. It will only be used for the purpose of determining your application for this position. It will also be used for purposes of enquiries in relation to the prevention and detection of fraud.

If you have declared any information relating to criminal convictions or other such offences, we will consider the following:

- The relevancy of the conviction/offence to the position being applied for.
- The seriousness of the offence(s)
- Your age when you committed the offence(s)
- The length of time since the offence(s) occurred
- If there is a pattern of offending behaviour
- The circumstances surrounding the offence(s)
- Any evidence you provide to demonstrate that your circumstances have changed since the offending behaviour

It is important to be aware that the failure to disclose all spent and unspent convictions which you are legally obliged to declare (i.e. those that are not protected by Exceptions Order of the Rehabilitation of Offenders Act (as amended in England and Wales), could result in disciplinary proceedings or dismissal.

Please ensure that you take the time to read the supplementary guidance that we sent to you with your application form. This provides you with detailed information about how we will process your application, the persons to whom information will be disclosed, and the range of checks that we will undertake as part of our recruitment process.

Useful guidance

If you have a criminal history, it will be important for you to refer to the easy to read [guidance documents](#) provided on the Unlock website.

Unlock is a charity body that provides information and advice to individuals to help them gain a greater understanding about the type of information employers are likely to seek about their criminal history, which convictions and cautions are protected under the Exceptions Order (i.e. will never be disclosed as part of a DBS check and do not need to be declared when completing this form) and their rights.

DECLARATION FORM

Please complete and return the form only to Temporary Staffing, Springview, Clatterbridge Health Park, Bebington Wirral CH63 4JY and e-mail tempstaffing@cwpl.nhs.uk

Before completing this form, it is important to note the following points:

- 1 You must answer all the questions in this form
- 2 Before ticking yes or no, please ensure that you to read the explanatory notes which are provided underneath each of the questions. These notes are intended to guide you in determining what additional information you will be required to provide to support your answers
- 3 If you answer yes to any of the questions, please use the space provided to include any relevant information about your suitability for the position you are applying for
- 4 If you would like any additional supplementary evidence to support your application to be considered, please ensure it is attached or uploaded with this form when you return it
- 5 You are not required to disclose information about parking offences

Applicant details

Full name (in block capitals)	MATTHEW A. ALUKO	Contact details	07479213713
Role applied for	HCA		

1. Are you currently bound over, or have you ever been <u>convicted of any offence</u> by a Court or Court Martial in the United Kingdom or in any other country? You should tick no, if any convictions are protected (or filtered out) by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) 2013. Please refer to information about protected convictions and cautions in the useful guidance section.	Yes	No
		X

If you have ticked yes, please provide details of the order binding you over and/or the nature of the offence, penalty, sentence or order of the Court, the date and place of the Court hearing

2. Have you ever received a <u>police caution, reprimand or final warning</u> in the United Kingdom or in any other country? You should tick no, if any cautions, reprimands or final warnings are protected (or filtered out) by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) 2013. Please refer to further information about protected convictions and cautions in the useful guidance section.	Yes	No
		X

If you have ticked yes, please provide details of the caution, reprimand or final warning, including the date and reason administered

DECLARATION FORM

3. Have you been charged with any offence in the United Kingdom or in any other country that has not yet been disposed of?	Yes	No
Please note that you <u>must</u> inform us immediately if you are charged with any offence in the United Kingdom or in any other country <u>after</u> you complete this form and <u>before</u> taking up any position offered to you		X
If you have ticked yes, please provide details of the nature of the offence with which you are charged, date on which you were charged, and details of any on-going proceedings by a prosecuting body		
4. Are you aware of any current investigations being undertaken by the police following allegations being made against you in the United Kingdom or in any other country?	Yes	No
If you have ticked yes, please provide details of the nature of the allegations made against you and, if known to you, any action to be taken against you by the police Please note that we will only take into account any current investigations which might be relevant to the position you are applying for		X
5. Have you ever been investigated by the NHS Business Services Authority (formerly NHS Counter Fraud and Security Management Services) or any other investigatory body resulting in a current or past conviction or any formal action being taken against you?	Yes	No
If you have ticked yes, please provide details of the offence, including any dates. Investigatory bodies may include HM Revenue & Customs, the Financial Services Authority, Department for Business, Energy and Industrial Strategy (formerly the Department of Trade & Industry), Department of Work and Pensions, Home Office, UK Visas and Immigration and local authorities This list is intended as a guide only, <u>you must</u> declare any investigation conducted by an investigatory body		X
6. Have you ever been dismissed by reason of misconduct from any employment, volunteering, office, or other position previously held by you?	Yes	No
If you have ticked yes, please provide details of the employment, volunteering, office or other position held, the date that you were dismissed and the nature of allegations of misconduct made against you		

DECLARATION FORM

7. Are you currently subject to a fitness to practise investigation and/or proceedings of any nature by a regulatory or licensing body in the UK or in any other country?	Yes	No <input checked="" type="checkbox"/>
<p>If you have ticked yes, please provide the reasons given for the investigation and, where applicable, the details of any warnings, conditions or sanctions (including limitations, suspension or any other restrictions) that apply to your professional registration and, the name and address of the regulatory or licensing body concerned.</p> <p>Please note that we will only take into account any current fitness to practise investigation or proceedings which might be relevant to the position you are applying for</p>		
8. Have you ever been removed from the register, or have conditions or sanctions been placed on your registration, or have you been issued with a warning by a regulatory or licensing body in the UK or in any other country?	Yes	No <input checked="" type="checkbox"/>
<p>You should tick no, where any right to appeal has been upheld and where that appeal has resulted in your case being fully exonerated</p> <p>If you have ticked yes, please provide details of any conditions or sanctions (including limitations, suspension or any other restrictions) that apply to your registration and/or any warnings issued, where relevant and, the name and address of the regulatory or licensing body concerned</p>		
9. Are you subject to any other prohibition, limitation, or restriction that means we are/or may be unable to consider you for the position for which you are applying?	Yes	No <input checked="" type="checkbox"/>
<p>If you have ticked yes, please include details of the nature of the prohibition, restriction or limitation and by whom it was made.</p>		

DECLARATION FORM

Continuation sheet:

If you have answered yes to any of the questions above, please use the space below to provide any additional information you wish us to consider as part of your application. You may continue on a separate sheet or attach any additional evidence, if you wish to do so.

Please clearly indicate the number of the question to which the information relates.

DECLARATION FORM

Declaration – Agency Worker

IMPORTANT

The Data Protection Act 1998 requires us to advise you that we will be processing your personal data. Processing includes holding, obtaining, recording, using, sharing and deleting information.

The Act defines 'sensitive personal data' as racial or ethnic origin, political opinions, religious or other beliefs, trade union membership, physical or mental health, sexual life, criminal offences, criminal convictions, criminal proceedings, disposal or sentence.

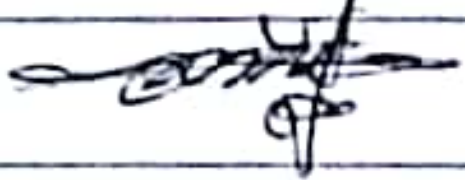
The information that you provide in this declaration form will be processed in accordance with the Data Protection Act 1998. It will be used for the purpose of determining your application for this position. It will also be used for purposes of enquiries in relation to the prevention and detection of fraud.

Once a decision has been made concerning your appointment, CWP will not retain this declaration form any longer than is necessary - see further details in the supplementary guidance notes for applicants which we provided with your application form. This declaration will be kept securely and in confidence. Access to this information will be restricted to designated persons within the organisation who are authorised to view it as a necessary part of their work.

In signing the declaration on this form, you are explicitly consenting for the data you provide to be processed in the manner described above.

I confirm that the information that I have provided in this declaration form is correct and complete. I understand and accept that if I knowingly withhold information, or provide false or misleading information, this may result in my application being rejected, or if I am appointed, in my dismissal, and I may be liable to prosecution.

Please sign and date this form.

Full name (in block capitals)	MATTHEW H. AZIKO	Signature	
Date	03/12/18		

If you need any assistance or advice before returning this form to us, or you wish to withdraw your consent at any time after you have submitted this form, please contact CWP.

All enquiries will be treated in strict confidence.