

DBS Update Service

Criminal Records Status Check Consent Form

Name:
Address:
DOB:
Disclosure Number:
Date of issue:
I confirm that the above Disclosure is registered with the DBS Update Service and I hereby give permission for The FA (or its nominated agent) to carry out a status check with the DBS Update Service annually, commencing on the 1 st anniversary of the issue of said Disclosure, or at any interval deemed appropriate.
I confirm I will produce the current DBS certificate and any further information required to carry out the DBS status check.
I acknowledge The FA (or its nominated agent) may require a new DBS check application where the certificate presented is not the appropriate level or for an equivalent role.
I further acknowledge that should I wish my DBS check to be removed from the Update Service I will notify The FA accordingly to cease the status check as detailed above.
Where the DBS status check indicates the Disclosure Certificate is no longer current I acknowledge a new DBS application is required within 28 days
Signed
Print name