**FOWEY PRIMARY SCHOOL**

**STAFF AND VOLUNTEER SUITABILITY DECLARATION**

Following [supplementary advice](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/362919/Keeping_children_safe_in_education_childcare_disqualification_requirements_-_supplementary_advice.pdf%22%20%5Ct%20%22_blank%22%20%5Co%20%22Link%20to%20the%20supplimentary%20advice%3A%20opens%20in%20a%20new%20browser%20window) to the [Keeping Children Safe in Education](https://www.gov.uk/government/publications/keeping-children-safe-in-education%22%20%5Ct%20%22_blank%22%20%5Co%20%22Link%20to%20the%20Keeping%20Children%20Safe%20in%20Education%20document%3A%20opens%20in%20a%20new%20browser%20window) statutory guidance to help schools understand the requirements placed on them by childcare legislation, namely the Childcare Act 2006 and the Childcare (Disqualification) Regulations 2009 published by the Department for Education in October 2014.

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| **This form is to be completed by all staff AND completed by all staff and volunteers on an annual basis****Name of staff: …………………………………………………………………………….****Name of Manager: Chris Wathern**Please answer the questions and sign the declaration below to demonstrate that you are safe to work with children. If there are any aspects of the declaration that you are not able to meet, you should disclose this immediately to the manager/senior responsible for your recruitment.**Please circle yes or no against each bullet point:** |
| Have you been cautioned, subject to a court order, bound over, received a reprimand or warning or found guilty of committing any offence **since the date of your most recent enhanced Disclosure and Barring Service (DBS) disclosure?** | **Yes / No** |
| Have you been cautioned, subject to a court order, bound over, received a reprimand or warning or found guilty of committing any offence **either before or during your employment at this setting?** | **Yes / No** |
| Are you ‘Disqualified for Caring for Children’: * Have you committed any offences against a child?
* Have you committed any offences against an adult (eg rape, murder, indecent assault, actual bodily harm, etc)?
* Have you been barred from working with children (DBS)?
* Are you living with someone who has been barred from working with children (DBS)?
* Are you living in the same household as someone who has been disqualified from working with children under the Childcare Act 2006?
* Have your own children been taken into care?
* Have/are your own children the subject of a child protection order?
 | **Yes / No****Yes / No****Yes / No****Yes / No****Yes / No****Yes / No****Yes / No** |
| Has your name been placed on the DBS barring list? | **Yes / No** |
| Do you have any medical conditions that could affect your ability to care for children? | **Yes / No** |
| Are you taking any medication on a regular basis or any other substances? | **Yes / No** |
| If you have answered **YES** to any of the questions, please provide further information below:……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………I understand my responsibility to safeguard children and am aware that I must notify my manager of anything that may affect my suitabilityI will ensure I notify my employer of any convictions, cautions, court orders, reprimands or warnings I may receiveI am aware that if I am taking medication on a regular basis I must notify my employer and must keep the medication in a safe place, out of reach of childrenI will ensure I notify my manager if I experience any health concerns which could impact upon my ability to work with childrenI give permission for you to contact any previous settings, local authority staff, the police, the DBS or any medical professionals to share information about my suitability to care for childrenSigned: ……………………………………………………………………………… Date: ………………………………… |
| Headteacher signature ……………………………………………………… Date: ………………………………… |

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| **Headteacher to complete****Name of Staff Member:** ………………………………………………………Please record follow-on action taken, where relevant:…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………Headteacher signature: …………………………………………… Date action taken: ………………………… |