

ENGLAND SQUASH

Personal Disclosure Form

You have the right of access to information held on you and other rights under the Data Protection Act 1984

Part A

Title: _____

First Name (s): _____

Surname: _____

Level of Qualification (if coach or referee): _____

Please provide names that you may have previously been known by
(incl. first names, surnames and maiden names):

Address: _____

_____ Post Code _____

Note: Post Code MUST be completed

Telephone: (Include national code): Daytime: _____ Evening: _____

E-Mail Address: _____

Date of birth: _____ Gender : M F *Please tick as appropriate.*

Current Club(s)	Current County (if county volunteer)	Position (* Please delete as appropriate)	Start Date
		Manager/Coach/Official/Child Officer /Other*	
		Manager/Coach/Official/Child Officer /Other*	
		Manager/Coach/Official/Child Officer /Other*	

Previous Club	Previous County (if county volunteer)	Date from	Date to	Reason for moving on

I confirm that I have seen identification documents relating to this person e.g. passport, driving licence.

Signature of Club/County Secretary or other designated officer (must be different from the individual in Part A):

Print name: _____

Club/County name: _____

Part B

Self Declaration (for completion by the individual named in Part A)

Have you ever been convicted of any criminal offences? (excluding motoring offences) **YES/NO***

If YES, please provide details of any criminal convictions:

NOTE: You are advised under the provisions of the Rehabilitation of Offenders Act 1974 (exceptions) Order 1975 as amended by the Rehabilitation of Offenders Act 1974 (Exceptions Amendment) Order 1986, you should declare all convictions including 'spent' convictions.

Are you a person who has been investigated by any Social Services department as being an actual or potential risk to children or young people? **YES/NO***

If YES, please supply details:

Have you ever had any disciplinary sanction relating to child abuse? **YES/NO***

If YES, please supply details:

*** Delete as appropriate.**

IMPORTANT

I understand that this post may involve access to children, young people and vulnerable adults and I hereby consent to England Squash checking my information by passing my details to the Criminal Records Bureau (CRB) and/or the police and/or Social Services.

I understand that the information contained on this form, the results of all checks and information supplied by third parties, will be included on the England Squash Child Protection Register and may be notified to my club and may be supplied by England Squash to other persons or organisations who have an interest in child protection issues.

Signed by the above named individual: _____

Date: _____

This form should be returned IMMEDIATELY to:

The Chief Executive, England Squash, National Squash Centre, Rowsley Street, Manchester, M11 3FF