



CRIMINAL CONVICTIONS DECLARATION FORM

Please complete, sign and return the attached form to us in the envelope provided labelled “Private and Confidential; F.A.O. Karen Anderson, Advocacy Manager”, together with your other forms. Failure to return the form could prevent further consideration of your application.

Please give details regarding convictions (spent and unspent) by answering the questions in section 1.

Please give details of relevant non-conviction information by answering the questions in section 2.

Please sign and date the Criminal Convictions Declaration Form in section 3.

If you have no convictions, spent or unspent, or relevant non-conviction information to tell us about, please go straight to section 3 and sign the Declaration Form.

If you require more space, please continue on a separate sheet.



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PRIVATE AND CONFIDENTIAL

Section 1

Please give the date and details of the conviction(s) that you have, the sentence that you received and the court where it was imposed.

Please give details of the reasons that led to your offence(s):

Please give details of how you completed the sentence imposed.

(For example: Did you pay your Fine as required?, What conditions were attached to your Probation / Community Service / Supervised Attendance Order?, Did you comply with the requirements of your order / custodial sentence?)

Has any organisation supported you to work through any of the above issues?

What have you learned from the experience that relates to working?

Section 2

Please give details of any non-conviction information that is relevant to the role of Volunteer Advocacy Worker with AdvoCard. This might include any cautions or police warnings that you have received which did not lead to a conviction or also an imminent appearance in court. (Please continue overleaf if necessary.)

Section 3 Declaration

I certify that the information contained in this form is true and correct to the best of my knowledge and realise that false information or omissions may lead to disqualification from working at AdvoCard.

I understand that if I am successful in my application and am offered a post with AdvoCard I will be subject to either establishing my membership of the PVG scheme or updating my existing membership of the PVG Scheme through Disclosure Scotland.

Signature _____ Date _____

Full name (block capitals) _____

The information given on this form will be treated in the strictest confidence.