DBS Evidence compliance form.

Applicant’s details (person applying for a DBS)

|  |  |
| --- | --- |
| Applicant’s name: |  |
| Date of birth: |  |
| Contact number: |  |
| Email: |  |

Documents submitted – please list the documents submitted below

|  |  |
| --- | --- |
| 1 |  |
| 2 |  |
| 3 |  |

Declaration: As the undersigned, I confirm I have seen the original documents as listed above (original physical documents must be seen in person)

|  |  |
| --- | --- |
| Name: |  |
| Date: |  |
| Contact Number: |  |
| Email: |  |
| Signature: |  |

When complete, please email to child.employment@essex.gov.uk in order that an appointment can be arranged via Teams.