

## **The Police Act 1997 (Form and Manner of Applications for Standard and Enhanced Disclosures) (Business as Usual) Determination 2020**

The Scottish Ministers make the following determination in exercise of the powers conferred by section 125A(1) of the Police Act 1997 and all other powers enabling them to do so.

This Determination may be cited as the Police Act 1997 (Form and Manner of Applications for Standard and Enhanced Disclosures) (Business as Usual) Determination 2020 and has effect from 26 June 2020.

Scottish Ministers determine that the form and manner of an application to Disclosure Scotland for:

- a criminal record certificate (standard disclosure) under section 113A(1)(a) of the Police Act 1997;
- an enhanced criminal record certificate (enhanced disclosure) under section 113B(1)(a) of the Police Act 1997;
- a criminal record certificate: Crown employment under section 114(1)(a) of the Police Act 1997; or
- an enhanced criminal record certificate: judicial appointments and Crown employment under section 116(1)(a) of the Police Act 1997

is:

- on paper (Annex 1), or
- by email via the electronic template on Disclosure Scotland's website (Annex 2).



### **Gerard Hart**

Interim Chief Executive  
Disclosure Scotland  
1 Pacific Quay  
Glasgow

Date: 24 June 2020

# Annex 1

PROTECT – PERSONAL (WHEN COMPLETED)

## Countersignature

**PART E** Countersignature - To be completed by the Countersignatory (Read Note E). For basic applications paid for by invoice, complete E8 to E12 and E20/E21 only.

**Role Details (Excluding Basic Applications)**

E1 Organisation Name

E2

E3 Position Applied For

E4

**Exempted Question/ Prescribed Purpose (Excluding Basic Applications)**

E5 Do you confirm that the certificate is required for the purposes of an Exempted Question? Yes  No

E6 Do you confirm that the certificate is required for a Prescribed Purpose? Yes  No

**List Searchee (Excluding Basic Applications)**

E7 Does the position qualify for the inclusion of suitability information relating to children? Yes  No

E8 Does the position qualify for the inclusion of suitability information relating to protected adults? Yes  No

**Registered Body or Responsible Body Details**

E9 Registered Body Name

E10 Registered Body/Sub Account Code (Code of account to be invoiced.)

E11 Countersignatory Name

E12 Countersignatory Code

**Confirmation of Identity (Excluding Basic Applications)**

The person countersigning must satisfy themselves as to the identity of the Applicant. A minimum of three forms of identity must be checked; if possible, one of them should be photographic. These should confirm the name, the date of birth and the current Home Address of the Applicant. Cross the appropriate boxes below to confirm what has been checked.

E13 Birth Certificate  Passport  Driving Licence (with photograph)  Driving Licence (without photograph)  National ID Card  National Entitlement Card  Other

If 'Other' then please state the form of identification seen.

E14

E15

E16 Authentication Reference Number

**Countersigning on Behalf of Another Organisation (Excluding Basic Applications)**

E17 Are you countersigning this application on behalf of another organisation? Yes  No  If 'Yes', supply name of organisation below.

E18 Organisation Name

E19

**Declaration**

I understand the following:

- Disclosure Scotland will use the information I have given to check and process this application. It will also use it for the purposes of the prevention or detection of crime and for other related purposes.
- Disclosure Scotland may pass the information to other Government departments or organisations, the police and other law enforcement agencies for the purposes of the prevention and detection of crime, of the apprehension and prosecution of offenders and for other related purposes.

I confirm that the information I have supplied is complete and correct. I understand that to knowingly make a false statement in this application is a criminal offence. I will give any additional information that may be required to verify the information given and will immediately notify any changes to this information.

E20/E21 Signature PLEASE KEEP SIGNATURE WITHIN BOX Signature Date DD / MM / YYYY

The signature you supply here will be checked against the sample you provided at registration.

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PROTECT – PERSONAL (WHEN COMPLETED)

## Disclosure SCOTLAND Police Act Disclosure Application

**FOR OFFICIAL USE ONLY**

\*PLEASE REFER TO THE ACCOMPANYING GUIDANCE NOTES AS YOU COMPLETE THE FORM.

- Please print in CAPITAL letters within the white boxes and do not make a mark on any other part of the form. We recommend you use blue or black ink.
- Applicants should complete PARTS A, B, and C on pages 1, 2, and 3 of the form which are coloured blue. The Applicant may also have to complete PART D depending on whether or not they are paying for the Disclosure. Please check payment arrangements before completing PART D.
- Mandatory fields are highlighted in yellow. You must provide information in these fields or your application will be delayed.
- Please make a note of the Barcode Number at the top to assist with any future query.

**PART A Type of Application (Read Note A)**

A1 Basic  Standard  Enhanced  Cross (X) one box only.

**PART B Personal Details (Read Note B)**

**Name(s)**

B1 Mr  Mrs  Ms  Miss  Other

B2 Present Surname

B3 Present Forename(s)

B4

B5 Are you now, have you ever been, or were you at birth known by a different name? Yes  No  If 'Yes', enter details below.

B6 Surname

B7 Forename(s)

B8

B9 Surname

B10 Forename(s)

B11

B12 If you require more space use a separate piece of paper and cross (X) this box.

B13 Mother's Maiden or Family Name

**Birth Details**

B14/B15 Date of Birth DD / MM / YYYY Gender Male  Female

B16 Town of Birth

B17 Country of Birth

B18 Nationality

**Additional Information**

B19 Do you have a UK National Insurance Number? Yes  No  If 'Yes', enter details below.

B20 National Insurance No.

B21 Do you have a Passport? Yes  No  If 'Yes', enter details below.

B22 Full Passport No.

B23 Country of Issue

B24 Do you have a Driving Licence? Yes  No  If 'Yes', enter details below.

B25 Driving Licence No.

B26 Country of Issue

PROTECT – PERSONAL (WHEN COMPLETED) Page 1 of 4

### Additional Information, Contact Details & Address History

**Additional Information continued**

B27 Do you have a National Identity Card? Yes  No  If 'Yes', enter details below.

B28 National Identity Card No.

B29 Country of Issue

B30 National Entitlement Card No.

B31 PVG Scheme ID

B32 Electricity Supplier No.

**Contact Details**

B33 Day Contact No.

B34 Evening Contact No.

B35 Email Address

B36

**Current Address** This is the address which will be printed on the applicant's certificate and to which the certificate will be sent.

B37 Address (Number, Street)

B38

B39 Post Town

B40 County

B41/B42 Post Code  Resident From  /  /  /  /  /

B43 Country

**Address History** Please provide your address history in the last five years. (Most recent first, excluding current address.)

B44 Address (Number, Street)

B45

B46 Post Town

B47 County

B48/B49 Post Code  Resident From  /  /  /  /  /

B50 Country

B51 Address (Number, Street)

B52

B53 Post Town

B54 County

B55/B56 Post Code  Resident From  /  /  /  /  /

B57 Country

B58 If you require more space use a separate piece of paper and cross (X) this box.

### Declaration and Payment

**PART C Declaration (Read Note C)**

I understand the following:

- Disclosure Scotland will use the information I have given to verify my identity and to check and process my application. Disclosure Scotland will use this information for the purposes of the prevention or detection of crime and for other related purposes.
- Disclosure Scotland may pass the information it holds about me to other Government departments or organisations, the police and other law enforcement agencies for the purposes of the prevention and detection of crime, of the apprehension and prosecution of offenders and for other related purposes.

I declare that the information I have given is complete and correct. I understand that to knowingly make a false statement in this application is a criminal offence. I will give any additional information that may be required to verify the information given and will immediately notify any changes to this information.

B1/D2 Applicant's Signature  PLEASE KEEP SIGNATURE WITHIN BOX Signature Date  /  /  /  /  /

**PART D Payment (Read Note D)**

If you, as the Applicant, are paying for this application, complete PART D before forwarding the form to the person who will be countersigning it. If you are not paying for it, leave PART D blank and forward the form directly to them.

D1 If you are the Registered/Responsible Body and you wish this application to be included on your invoice please cross (X) this box and complete D2.

**D2 Method of Payment**

Registered Body/ Responsible Body Invoice  Cheque  VISA  Master Card  Maestro   
 Solo  VISA Electron  VISA Debit/ Cards  Postal Order  Voucher

Please make cheques payable to 'Disclosure Scotland'. We recommend the cheque is completed in blue or black ink.

**Credit/Debit Card Payments**

D3 Card Number  This is the large number written across the middle of your card. Do not leave blank spaces.

D4/D5 Expiry Date  /  /  /  Issue Number  (if applicable)

D6 Name of Cardholder

D7/D8 Cardholder's Signature  PLEASE KEEP SIGNATURE WITHIN BOX Signature Date  /  /  /  /  /

**Voucher Payments**

D9 Voucher Number

COUNTERSIGNED APPLICATIONS - send completed application forms to the person who will be countersigning your application.  
 NON-COUNTERSIGNED APPLICATIONS - send completed application forms to: Disclosure Scotland, PO BOX No. 250, GLASGOW, G51 1YU.

**FOR DISCLOSURE SCOTLAND USE ONLY. DO NOT WRITE BELOW THIS LINE.**

Correct Payment  Amount  /  /  Sort Code

Account Number  Cheque Number

Other

Initials

## Annex 2

**All fields must be filled unless marked as optional. Please use block capitals.**

### 1. About you; the individual

Date submitted: Click or tap to enter a date.  
Application type: Choose an item.  
Title: Choose an item.  
Surname: Click or tap here to enter text.  
Forename(s): Click or tap here to enter text.  
Gender: Click or tap here to enter text.  
Previous names (if any)  
Previous surname: Click or tap here to enter text.  
Previous forename(s): Click or tap here to enter text.  
Mother's maiden name: Click or tap here to enter text.  
Date of birth: Click or tap to enter a date.  
Town of birth: Click or tap here to enter text.  
Country of birth: Click or tap here to enter text.  
Nationality: Click or tap here to enter text.  
National insurance number: Click or tap here to enter text.  
Driver license number (if any): Click or tap here to enter text.  
Country of issue: Click or tap here to enter text.  
Passport number: Click or tap here to enter text.  
Country of issue: Click or tap here to enter text.

### 2. Your contact details

Email address: Optional - click or tap here to enter text.  
Home telephone: Optional - click or tap here to enter text.  
Mobile number: Optional - click or tap here to enter text.

### 3. Your current address

Address line 1: Click or tap here to enter text.  
Address line 2: Click or tap here to enter text.  
Town: Click or tap here to enter text.  
Country: Optional - click or tap here to enter text.  
Postcode: Click or tap here to enter text.  
Resident from: Click or tap to enter a date.

If you have lived at this address for less than five years, you must provide previous addresses below to cover this period.

## 4. Your previous addresses

### 4.1 Previous address 1

Address line 1: Click or tap here to enter text.

Address line 2: Click or tap here to enter text.

Town: Click or tap here to enter text.

Country: Click or tap here to enter text.

Postcode: Click or tap here to enter text.

Resident from: Click or tap to enter a date.

### 4.2 Previous address 2

Address line 1: Click or tap here to enter text.

Address line 2: Click or tap here to enter text.

Town: Click or tap here to enter text.

Country: Click or tap here to enter text.

Postcode: Click or tap here to enter text.

Resident from: Click or tap to enter a date.

### 4.3 Previous address 3

Address line 1: Click or tap here to enter text.

Address line 2: Click or tap here to enter text.

Town: Click or tap here to enter text.

Country: Click or tap here to enter text.

Postcode: Click or tap here to enter text.

Resident from: Click or tap to enter a date.

### 4.4 Previous address 4

Address line 1: Click or tap here to enter text.

Address line 2: Click or tap here to enter text.

Town: Click or tap here to enter text.

Country: Click or tap here to enter text.

Postcode: Click or tap here to enter text.

Resident from: Click or tap to enter a date.

## 5. Declaration on application

I understand the following:

- Disclosure Scotland will use the information I have given to verify my identity and to check and process my application. Disclosure Scotland will use this information for the purposes of prevention or detection of crime and for other related purposes.
- Disclosure Scotland may pass the information it holds about me to other Government departments or organisations, the police and other law enforcement agencies for the purpose of the prevention and detection of crime, of the apprehension and prosecution of offenders and for other related purposes.
- 

I declare that the information I have given is complete and correct. I understand that to knowingly make a false statement in this application is a criminal offence. I will give any additional information that may be required to verify the information given and will immediately notify any changes to this information.

Applicant's signature:  Click or tap here to enter text.

Signature date:  Click or tap to enter a date.

## 6. Payment

If you, as the applicant, are paying for this application, please complete this section. If you are not paying for it, this should be completed by the person who is countersigning it.

Method of payment:  Choose an item.

If you are paying by card, please use our [payment portal](#), and then insert your payment reference number below.

9-digit payment reference number:  Enter the 9-digit number here.

**These sections should only be completed if you are applying through a Registered or Responsible Body. They should be completed by the countersignatory before this form is submitted to Disclosure Scotland.**

**7. Role details (excluding Basic applications)**

Will the work be carried out at the home address of the applicant?  Yes  No

Organisation name: [Click or tap here to enter text.](#)

Position applied for: [Click or tap here to enter text.](#)

Description of role: [Optional - click or tap here to enter text.](#)

**8. Exempted question/prescribed purpose (excluding Basic applications)**

Do you confirm that the certificate is required for the purposes of an exempted question?  Yes  No

Do you confirm that the certificate is required for a prescribed purpose?  Yes  No

**9. List searches (excluding Basic applications)**

Does the position qualify for the inclusion of suitability information relating to children?  Yes  No

Does the position qualify for the inclusion of suitability information relating to protected adults?

Yes  No

**10. Confirmation of identity (excluding Basic applications)**

Employers must check the identity of the applicant. You should ask for three forms of identity. If possible, one should be photographic. Please confirm below which forms of identity have been checked.

Birth certificate  Passport  Drivers licence  ID card  Entitlement card  Other (specify):

**11. Registered Body or Responsible Body details**

Registered body name/code: [Choose an item.](#)

Responsible body details (if applicable): [Click or tap here to enter text.](#)

Countersignatory name: [Click or tap here to enter text.](#)

Countersignatory code: [Click or tap here to enter text.](#)

12. Countersigning on behalf of another organisation (excluding Basic applications)

Are you countersigning this application on behalf of another organisation?

Yes  No

Organisation name: [Click or tap here to enter text.](#)

13. Countersignatory declaration

I understand the following:

- Disclosure Scotland will use the information I have given to check and process this application. It will also use it for the purpose of the prevention of crime or detection of crime and for other related purposes.
- Disclosure Scotland may pass the information it holds to other Government departments or organisations, the police and other law enforcement agencies for the purposes of the prevention and detection of crime, of the apprehension and prosecution of offenders and for other related purposes.

I confirm that the information I have supplied is complete and correct. I understand that to knowingly make a false statement in this application is a criminal offence. I will give any additional information that may be required to verify the information given and will immediately notify any changes to this information.

Countersignatory signature: [Click or tap here to enter text.](#)

Declaration date: [Click or tap to enter a date.](#)

Either a typewritten or scanned signature is valid. There is no need to print and sign a form by hand.



