

AN APPLICANT'S GUIDE TO CHECKING & COMPLETING AN 'EXISTING SCHEME MEMBER APPLICATION'

CONTENTS:

- INTRODUCTION
- DO'S AND DON'TS
- COMMON ERRORS
- APPLICATION FORM BREAKDOWN
- APPLICANT CHECKLIST

INTRODUCTION:

Our Application Processing department are responsible for carrying out quality assurance checks on all application forms received. Unnecessary delays to processing applications are caused by **mandatory fields** being omitted from an application form or where completed fields have been endorsed incorrectly. Please note all mandatory fields are highlighted in **yellow** on the application form. This guide has been created to help identify the most common errors and how to avoid these, it also includes a list of 'Do's' and 'Don'ts', a breakdown of what information each field should contain and an applicant's checklist for you to refer to before submitting an application to Disclosure Scotland or to a registered person/employer.

DO'S AND DON'TS:

<u>DO</u>	<u>DON'T</u>
Make a note of the application form number (the 16 digit number printed under the barcode in the top right hand corner on the front of the form) for enquiry purposes. Note that this is not the same as the PVG Scheme membership number which will be printed on a disclosure record when it is issued.	Don't place any stamps or stickers on the form.
Ensure all fields have been completed unless guidance notes suggest otherwise. Mandatory fields are highlighted in yellow.	Don't write over the edges of the boxes.
Ensure all choices in the boxes are indicated by a cross [X], not a [✓].	Don't submit any scanned, downloaded or photocopied versions of an application form, we are unable to accept these and the application(s) will be rejected.
Ensure the application has been completed in black or blue ink and written clearly in BLOCK CAPITALS within the boxes provided.	Don't send any original documents to Disclosure Scotland, we only require photocopies of documents.
Ensure only one letter or number has been used for each box. The number of boxes given for each section indicates the maximum amount of letters/numbers that the system will accept.	
If you make a mistake please ensure it is corrected by either using correcting fluid sparingly, or by clearly scoring through the error and by writing the answer in the remaining space. If this is not possible, please start a new form.	
Ensure the correct PVG Scheme Membership number has been endorsed at B1.	
Ensure supporting documentation has been supplied if you are notifying Disclosure Scotland of any changes to your personal details at B7.	

COMMON ERRORS:

The most common errors in relation to an Existing Scheme Member application are listed below. Please look out for these before submitting an application to a registered person to countersign or to Disclosure Scotland. All mandatory fields must be endorsed however please pay particular attention to the fields below to ensure they have been completed correctly, this will avoid any unnecessary delays to the progress of an application.

- **A1 – Level of Disclosure.** One of the most common errors at A1 is an individual applying for a Scheme Record Update for a workforce they haven't previously submitted an application for. For example, if you are a member of the PVG Scheme for children you can only apply for a Scheme Record Update for children. If you are now carrying out regulated work for both children and adults you must still complete an existing Scheme Member form but request a full Scheme Record and pay the appropriate fee. ***Please note Scheme Membership Statements & Scheme Membership Statements(Countersigned) do not contain vetting information but simply confirm if an individual is/is not barred from the relevant workforce. They are intended for use by individuals and personal employers. If you receive a Scheme Membership Statement because you have requested one in error, and want a Scheme Record/Scheme Record Update, you must submit another application and pay the appropriate fee.***
- **A2 -** Please ensure the correct workforce has been selected in relation to the position applied for. Disclosure Scotland are unable to add a workforce once an application has been submitted. You must only apply in relation to the type(s) of regulated work which you will be doing for an organisation. Please discuss with your employer if you are unsure of which workforce to select.
- **B1 – PVG Scheme Membership Number/PVG Scheme ID.** An individual's PVG Scheme Membership number is different to a certificate number. The Scheme membership number is unique to an individual and will start with the year that you became a member of the PVG Scheme, for example if you initially applied in 2014 your membership number will begin with the digits '14'. You will find your Scheme membership number on your certificate under your name and date of birth details and this will be 16 digits long. N.B *On the top right hand side of a certificate you will see 'Disclosure Number' followed by a number beginning with '20000', this is the certificate number and should not be endorsed at B1.*
- **B7 – Changes to an applicant's personal details.** We come across many errors in relation to B7, often where this has been omitted or 'yes' has been selected but no supporting documents have been attached to confirm the changes. Please ensure B7 has been marked and if 'yes' has been selected ensure the changes to the personal details have been included with the application, this can be noted on a separate piece of paper. If B7 has been omitted and confirmed as 'yes' once the application has been received by Disclosure Scotland we will require proof of the changes or confirmation from a countersignatory confirming what proof has been seen.

APPLICATION FORM BREAKDOWN:

PART A – TYPE OF APPLICATION

A1

Ensure you have selected the correct level of Disclosure and only one box has been marked.

PART A		Type of Application (Read Note A)	
A1	Cross (X) one box only.	Scheme Membership Statement <input type="checkbox"/>	Scheme Record <input type="checkbox"/>
		Scheme Record Update <input type="checkbox"/>	Scheme Membership Statement (Countersigned) <input type="checkbox"/>

Scheme Membership Statement:

Please note Scheme Membership Statements do not contain vetting information but simply confirm if an individual is/is not barred from the relevant workforce as they are intended for use by individuals. If you receive a Scheme Membership Statement because you have requested one in error, and want a Scheme Record, you must submit another application and pay the appropriate fee. ***If you have had a Scheme Membership Statement previously you are not eligible to apply for any additional statements for the same workforce previously applied for.***

Scheme Record:

Scheme Record certificates show full vetting information and the application must be countersigned by a registered person, this is normally your employer.

Scheme Record Update:

Scheme Record Update certificates are now called Short Scheme Record Disclosures and they will state whether an individual is under consideration for listing or not under consideration for listing and will also confirm that no vetting information is held. Where an individual has vetting information Disclosure Scotland will issue a full Scheme Record Certificate instead, at no additional cost.

An individual must currently be registered for the PVG Scheme for all type(s) of regulated work to which the application relates (workforce(s) selected at A2). This means you must have a Scheme Record for the type(s) of regulated work selected at A2 in order to apply for an update on the initial Scheme Record. If you do not have this information it can be provided by the helpdesk once security questions have been answered.

Scheme Membership Statement (Countersigned):

Please note Scheme Membership Statements(Countersigned) do not contain vetting information but simply confirm if an individual is/isn't barred from the relevant workforce, they are intended for use by personal employers. For example an individual employing a nanny/childminder to look after their children, not through an organisation.

PART A – TYPE OF APPLICATION CONT'D

A2

Mark an 'X' in each box that applies. You must only apply in relation to the type(s) of regulated work which you will be doing for the organisation or personal employer. Please confirm with your employer if you are unsure.

A3

Ensure an 'X' is marked in the appropriate box. You should indicate if you are already a member for the workforce(s) marked at A2. ***N. B if the answer is no you are not eligible to apply for a scheme record update.***

A4, A5 & A6

Mark an 'X' in the appropriate box. If 'yes' has been selected, please ensure you provide an email address at A5/6.

Note that on-line accounts are not currently available however we may use this email address to contact you.

A2	Cross (X) each box that applies.	This application relates to regulated work with:	Children <input type="checkbox"/>	Protected Adults <input type="checkbox"/>
A3	Are you already a scheme member in relation to ALL types of regulated work selected in A2?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
A4	If you currently do not have an online account, do you wish to apply for one with Disclosure Scotland?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, provide/confirm your email address below in fields A5/A6.				
A5	Email Address	<input type="text"/>		
A6		<input type="text"/>		

PART B – PERSONAL DETAILS

B1

A PVG Scheme Membership number is different to a certificate number and is unique to an individual. It will start with the year that they became a member of the PVG Scheme. For example, if an individual initially applied in 2014 their membership number will begin with the digits '14'. You will find your Scheme membership number on your certificate under your name and date of birth details as shown in the sample on the right hand side highlighted in yellow.

N. B on the top right hand side of a certificate you will see 'Disclosure Number' followed by a number beginning with '20000'. Please note: this is the certificate number and should not be endorsed at B1, please refer to sample certificate on right hand side.

PVG membership number highlighted in yellow
Disclosure certificate number highlighted in red

B2

Ensure an 'X' has been marked in the appropriate box. Examples of 'Other' may be Doctor, Reverend, Lord etc.

B3, B4 & B5

Current surname & forename(s) should be endorsed including any middle name(s). Please note this will be the name that appears on the applicant's certificate.

B6

Enter your date of birth in the format DD/MM/YYYY.

MR SAM PELL
1 ANY STREET
ANY TOWN
POST CODE

Disclosure Number: 0000000000000000
Date of Issue: 00/00/0000
Page 01 of 01

A copy of this disclosure record has also been sent to the relevant body which countersigned the application, or the relevant regulatory body.

Applicant Personal Details
Surname: PELL
Forename(s): SAM
Date of Birth: 00/00/0000
PVG Membership No: 0000000000000000

PART B		Personal Details (Read Note B)				
Personal Details						
B1	PVG Scheme ID					
B2	Title	Mr <input checked="" type="checkbox"/>	Mrs <input checked="" type="checkbox"/>	Ms <input checked="" type="checkbox"/>	Miss <input checked="" type="checkbox"/>	Other <input type="checkbox"/>
B3	Surname					
B4	Forename(s)					
B5						
B6	Date of Birth	DD	/	MM	/	YYYY

PART B – PERSONAL DETAILS CONT'D

B7

Ensure an 'X' has been marked as appropriate. If the applicant has selected 'yes' please ensure the details of the changes have been indicated on a separate piece of paper with the applicant's PVG ID number noted, this will allow Disclosure Scotland to identify any new information provided on the application form. Failure to do so will cause a delay to the application.

B7 Are there changes to your personal details that you have not already told us about? (See guidance) Yes No

If 'Yes' please supply these on a separate piece of paper.

Regulatory Body Details (see Guidance Notes)

B8 Have you registered with a Regulatory Body listed in the guidance notes since your last PVG Application? Yes No If 'Yes', enter details below.

B9/B10 Regulatory Body Code Registration No.

B11/B12 Regulatory Body Code Registration No.

B8-B12

Regulatory Body Details

An 'X' should be marked in the appropriate box. if the applicant is registered with any Regulatory Body listed above Disclosure Scotland should be notified.

Please refer to the below table for the format of B84/B86 and B85/B87.

Where there is an * detailed this may represent either a letter or a number.

Regulatory Body Name	Regulatory Body Code
Care Commission	101
General Chiropractic Council	102
General Dental Council	103
General Medical Council	104
General Optical Council	105
General Osteopathic Council	106
General Teaching Council for Scotland	107
Health Professions Council	108
Nursing and Midwifery Council	109
Royal Pharmaceutical Society of Great Britain (<i>now known as General Pharmaceutical Council</i>)	110
Scottish Social Services Council	111

PART C – DECLARATION (APPLICANT)

C1/C2

This records your signature and date. Please ensure the signature is kept within the box provided. If the signature has been omitted when this is received by Disclosure Scotland we will be unable to process the application and a new one will be required with a signature endorsed.

By signing the declaration on the form you are making certain statements –

- You are requesting a disclosure record under the PVG Scheme:
 - if you are already a member of the Scheme for one type of regulated work, you can only expand your membership of the Scheme to cover the other type of regulated work if you are not barred from doing that other type of regulated work. If you seek to do regulated work when you are barred from doing that type of regulated work, then you will commit a criminal offence.
 - you can only request disclosure records under the PVG Scheme for lawful purposes, usually that you are seeking to do the type(s) of regulated work to which the application relates.
- You are requesting that a disclosure record is issued to the persons specified in the application in relation to the type(s) of regulated work specified in your application.
 1. If you have asked for a Scheme Membership Statement, then by signing this form you are asking for this to be issued to you only
 2. If you have asked for a Scheme Record, then by signing this form you are asking for the Scheme Record to be issued to the organisation you wish to work for and, if applicable, to the General Teaching Council for Scotland or Scottish Social Services Council if you have given details of your registration with them in field B8. A copy of the Scheme Record will also be issued to you
 3. If you have asked for a Scheme Record Update, then by signing this form you are asking for the Scheme Record Update to be issued to the organisation you wish to work for. A copy of the Scheme Record Update will also be issued to you.
 4. If you have asked for a Scheme Membership Statement for a personal employer, then by signing this form you are requesting the Scheme Membership Statement to be issued to the personal employer. A copy of the Scheme Membership Statement will also be issued to you.
- You understand that Disclosure Scotland will use the information you have given to verify your identity and check and process your application. Disclosure Scotland will use the information about you for the purposes of the Scheme, for the prevention or detection of crime and for other related purposes. Disclosure Scotland will continuously monitor and update the information it holds about you.
- You understand that Disclosure Scotland may pass the information it holds about you to other Government departments or organisations, the police and other law enforcement agencies for the purposes of the Scheme, of the prevention and detection of crime, of the apprehension and prosecution of offenders and for other related purposes.
- You are confirming that the information you have given is complete and correct.
- You are confirming that you understand that to knowingly make a false statement in this application is a criminal offence.
- You are agreeing to give any additional information that may be required to verify the information given and will immediately notify any changes to your information.

PART C Declaration (Read Note C)

I request that a disclosure record be issued to the persons specified in this application in relation to the type(s) of regulated work specified. 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 and any other information relating to my Scheme membership for the purposes of the Scheme, for the prevention or detection of crime and for other related purposes. Disclosure Scotland will continuously monitor and update the information it holds about me.
- 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 Scheme, 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.

C1/C2

Applicant's Signature **PLEASE KEEP SIGNATURE WITHIN BOX** Signature Date DD / MM / YYYY

PART D - PAYMENT

D1

'Yes' should only be marked for voluntary positions with Qualifying Voluntary Organisations as defined in the PVG Legislation. By crossing 'Yes', you are confirming that you are entitled to a free PVG check and have been authorised by Disclosure Scotland to submit free checks. Organisations who cross 'Yes' for positions which are not entitled to free checks may be subject to further action.

D2

An 'X' should only be marked if this application is being paid for by a Registered Body. If this application is to be paid for by a Registered Body or Personal Employer please continue with section D.

PART D – PAYMENT CONT'D

D3

An 'X' should be marked in the appropriate box. Please ensure only one payment method has been selected, if more than one has been marked the application may be rejected or delayed. All cheques and postal orders should be made payable to 'Disclosure Scotland'.

D4-D8/9

This section should be completed for card payments marked at D3 only. If any other payment method has been selected this section should be blank.

Please note the hand writing should be particularly clear to ensure the data is captured correctly.

D10

Voucher number should be recorded here if using voucher as method of payment.

PART D		Payment (Read Note D)	
If you, as the Applicant, are paying for this application, complete PART D. If you are not paying for it, leave PART D blank and forward the form directly to the person who will be countersigning it.			
D1	Is this application in respect of a volunteer doing regulated work for a qualifying voluntary organisation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
D2	If this PVG Application is to be paid for by a Registered Body or Personal Employer, they should cross (X) this box and complete PART D.	<input checked="" type="checkbox"/>	

D3 Method of Payment					
Registered Body Invoice <input type="checkbox"/>	Cheque <input type="checkbox"/>	VISA <input type="checkbox"/>	Master Card <input type="checkbox"/>	Maestro <input type="checkbox"/>	
Solo <input type="checkbox"/>	VISA Electron <input type="checkbox"/>	VISA Debit/Delta <input type="checkbox"/>	Postal Order <input type="checkbox"/>	Voucher <input type="checkbox"/>	
Please make cheques payable to 'Disclosure Scotland'. We recommend the cheque is completed in blue or black ink.					
Credit/Debit Card Payments					
D4	Card Number	<input type="text"/>	This is the large number written across the middle of your card. Do not leave blank spaces.		
D5/D6	Expiry Date	<input type="text"/>	Issue Number	<input type="text"/> (if applicable)	
D7	Name of Cardholder	<input type="text"/>			
D8/D9	Cardholder's Signature	PLEASE KEEP SIGNATURE WITHIN BOX		Signature Date <input type="text"/>	
Voucher Payment					
D10	Voucher Number	<input type="text"/>			
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	<input type="checkbox"/>	Amount	<input type="text"/>	Sort Code	<input type="text"/>
Account Number	<input type="text"/>	Cheque Number	<input type="text"/>		
Other	<input type="text"/>				
Initials	<input type="text"/>				

For Disclosure Scotland use only, please do not mark.

PART E – REGISTERED BODY DETAILS

Please note this section should only be countersigned if you are applying for a Scheme Record or Scheme Record Update.

If applicable this section should be completed by the person countersigning your application, this is normally your employer.

Please forward to the signatory for completion before submitting to Disclosure Scotland.



Registered Body: Countersignatory Details and Declaration

PART E		Countersignature - To be completed by the Countersignatory (Read Note E)												
Role Details														
E1	Will the work be carried out at the home address of the Applicant?											Yes	No	
E2	Organisation Name													
E3														
E4	Position Applied For													
E5														
Confirmation of Identity														
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.														
E6	Birth Certificate	Passport	Driving Licence (with photograph)	Driving Licence (without photograph)	National ID Card	National Entitlement Card	Other							
If 'Other' please state the form of identification seen.														
E7														
E8														
E9	Authentication Reference No.													
Registered Body Details														
E10	Registered Body Name													
E11	Registered Body/ Sub Account Code	(Code of account to be invoiced.)												
E12	Countersignatory Name													
E13	Countersignatory Code													
Countersigning on Behalf of Another Organisation														
E14	Are you countersigning this application on behalf of another organisation?	Yes	No	If 'Yes', supply name of organisation below.										
E15	Organisation Name													
E16														
PART F		Countersignatory Declaration (Read Note F)												
I declare that the disclosure record is requested for the purpose of enabling or assisting me (or any other person for whom I act) to consider the applicant's suitability to do, or to be offered or supplied for, the type(s) of regulated work specified in this application. I understand the following:														
<ul style="list-style-type: none"> 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 Scheme, for 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 Scheme, 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.														
F1/F2	Signature	PLEASE KEEP SIGNATURE WITHIN BOX										Signature Date	DD / MM / YYYY	
The signature you supply here will be checked against the sample you supplied on the Registration application.														
Please send completed application forms to: Disclosure Scotland, PO BOX No. 250, GLASGOW G51 1YU.														

PART G – PERSONAL EMPLOYER DETAILS

This section should be completed for Scheme Membership Statements Countersigned only.

If applicable please forward to your personal employer.

Personal Employer Details and Declaration

PART G		To be completed by a Personal Employer (Read Note G)																					
Role Details																							
G1	Will the work be carried out at the home address of the Applicant?											Yes	No										
G2	Position Applied For																						
G3																							
Personal Employer Details																							
G4	Title	Mr	Mrs	Ms	Miss	Other																	
G5	Surname																						
G6	Forename(s)																						
G7																							
G8	Contact Phone No.																						
G9	Email Address																						
G10																							
Personal Employer Address This is the address your copy of the certificate will be sent to.																							
G11	Address (Number, Street)																						
G12																							
G13	Post Town																						
G14	County																						
G15	Post Code																						
G16	Country																						
PART H		Declaration (Read Note H)																					
I declare that the disclosure record is requested for the purpose of enabling or assisting me (or any other person for whom I act) to consider the applicant's suitability to do, or to be offered or supplied for, the type(s) of regulated work specified in this application. I understand the following:																							
<ul style="list-style-type: none">• 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 Scheme, for 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 Scheme, 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.																							
H1/H2	Signature	PLEASE KEEP SIGNATURE WITHIN BOX										Signature Date		D	D	/	M	M	/	Y	Y	Y	Y
Please send completed application forms to: Disclosure Scotland, PO BOX No. 250, GLASGOW G51 1YU.																							

APPLICANT CHECKLIST FOR AN EXISTING MEMBER APPLICATION

APPLICANT CHECKLIST	✓
Have you confirmed that you are a currently a member of the PVG scheme?	
Have you confirmed that you are member of the workforce(s) selected (if applying for a Scheme Record Update)?	
Have you kept a note of the application barcode?	
Have all mandatory fields been completed?	
Have you applicant signed and dated C1/2?	
If you are paying for the application – Have you selected one method of payment and if applicable attached physical payment e.g. cheque supplied?	
Have you completed a valid PVG Membership number at B1?	
If B7 is marked 'Yes', have the changes to your personal details been noted on a separate piece of paper within the application form?	