

Employee Consent for Disclosure and Barring Service

Annual Status Update Check.

Name of Employee:	Name of Line Manager:
Job Title:	
Contact Telephone Number(s)	
Work:	Home:
<p>Declaration of consent</p> <p>I hereby give consent for the Council's authorised DBS Countersignatory to check the current status of my DBS disclosure in connection with my role as detailed above.</p> <p>Consent is given on the understanding that only one status update check will be made; that I will be notified of the outcome of the check and that my consent will be sought again in the future if further status update checks are required.</p> <p>I understand that it is my responsibility to inform my Line Manager, HR and the Designated Safeguarding Officer if I am convicted of a new criminal offence that may affect my continued suitability to maintain DBS clearance. I understand that failure to notify the Council of a criminal offence is a serious matter and may result in disciplinary action up to and including dismissal.</p> <p>I understand that my line manager will be notified of the result of the check and, if the status of my DBS disclosure has changed, I will be required to discuss the changes with my line manager and any other relevant officer (i.e. Human Resources Manager, Head of Service, Designated Safeguarding Officer)</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Signed Date </div>	
<p>For office use only:</p> <p>Date of check:</p> <p>Result:</p> <p>Further action required – Yes / No (if Yes, give details below)</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Date line manager notified: Date HR notified: </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Expenditure code for check. Name of Countersignatory: </div>	