



CAREESSENCE
Caring for you holistically

DBS QUESTIONNAIRE

Title (Mr, Mrs, Miss, Ms, Other)	
Surname	
Forename(s) including middle name(s)	
Have you been known by any other name/s? If yes please state	
Current Address:	
At Current Address Since	
If you have been at your current address for less than 5 years, please give your previous address	
Date of Birth (DD/MM/YYYY)	
Gender	
Surname(s) At Birth (if different) Used From (YYYY) and Used until (YYYY)	
Town/City of Birth	
County/District of Birth	
Born in the UK (Yes or No)	
Nationality	
Position Applied for	
Unspent Criminal Convictions (Yes or No)	
Contact Telephone Number	

Passport Number & Issuing Country (i.e. British, South African)	
Issue Date	
If you do not have a valid passport please complete below:	
Driving Licence Number (only UK issued photo card) (18 digits long)	
Valid From	

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Section 2
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Please provide 5 years continuous address history (UK or Overseas) with all gaps accounted for.

Address: _____

Postal Code: _____

From: (MMYYYY) _____ **until:** (MMYYYY) _____

Address: _____

Postal Code: _____

From: (MMYYYY) _____ **until:** (MMYYYY) _____

Address: _____

Postal Code: _____

From: (MMYYYY) _____ **until:** (MMYYYY) _____

Address: _____

Postal Code: _____

From: (MMYYYY) _____ **until:** (MMYYYY) _____

Section 3

Declaration by Applicant

I confirm that you may hold the details I have provided in a retrieval system for the purposes of my recruitment and that you may disclose the information to the Disclosure & Barring Service.

I declare that the information provided in the CRB/DBS Questionnaire are full and accurate and that the supporting documents, which I have provided, are genuine and relate to me.

Name:.....

Date:.....

Signed:.....

Declaration by Person Examining Identity Documents

I have examined the documentation provided by the above-named applicant and believe it to be valid and to relate to the Applicant.

Name:.....

Date:.....

Signed:.....