



Vetting Form

Completion of this Vetting Form **MUST** be done in conjunction with the guidance notes. Use additional sheets of paper if required and attach after section 4c.

For Official Use Only			
Name		Applicant Ref. No.	
All vetting checks relative to the above named applicant have been completed. In this regard, *vetting clearance has been approved/refused/the attached issues require further consideration/exploration before a decision can be made.			
Force Vetting Officer		Date Stamp	
To be completed by (Show name of person responsible):			
Accepted:	Yes		No
Further Enquiries:	Yes		No
Date further enquiries completed:			
By whom:			



1a Personal Details:

Surname:		Forename(s):	
Previous Name(s):			
Date of Birth (dd/mm/yyyy):			
Place of Birth: Town:		Country:	
Current Address:			
Postcode:			
All previous addresses during last 10 years with dates and reason for leaving: (continue on an additional sheet of paper if necessary and attach to this form)			
Email Address (if applicable):			
Telephone Numbers (including area code):			
Home:	Work (if convenient to contact you):	Mobile:	
Driving Licence No. :		National Insurance No. :	
Licence Type: (tick box)	Full:	Provisional:	

1b Give details of any service in HM Forces:

Force:	Number:		
Dates served:	Rank:		
Are you still on the reserve list?	Yes:		No:



1c Have you previously been the subject of a vetting procedure?

	Yes		No		Don't know	
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If YES, please give full details below:

2a Family/Domestic circumstances:

Details of Spouse/ Civil Partner		Partner		(Please tick appropriate box)
Surname(s):		Forename(s):		
Previous Surname(s):				
Date of Birth (dd/mm/yyyy):		If deceased, date of death		
Place of Birth: Town:		Country:		
Occupation:				
Address:				

2b Name of previous spouse(s)/civil partner(s)/partner(s):

(1) Surname(s):	Forename(s):
Previous Surname(s):	
Date of Birth (dd/mm/yyyy):	If deceased, date of death
Address:	
(2) Surname(s):	Forename(s):
Previous Surname(s):	
Date of Birth (dd/mm/yyyy):	If deceased, date of death
Address:	

2c Please give details of any parents/step parents/guardians applicable to you:

(1) Surname(s):	Forename(s):
Previous Surname(s):	
Relationship to you:	
Date of Birth (dd/mm/yyyy):	If deceased, date of death
Occupation:	
Address:	
(2) Surname(s):	Forename(s):
Previous Surname(s):	
Relationship to you:	
Date of Birth (dd/mm/yyyy):	If deceased, date of death
Occupation:	
Address:	
(3) Surname(s):	Forename(s):
Previous Surname(s):	
Relationship to you:	
Date of Birth (dd/mm/yyyy):	If deceased, date of death
Occupation:	
Address:	
(4) Surname(s):	Forename(s):
Previous Surname(s):	
Relationship to you:	
Date of Birth (dd/mm/yyyy):	If deceased, date of death
Occupation:	
Address:	



2d Details of your children/dependants:

Names and dates of birth of any children (including dependants and stepchildren) include current address if not residing at family home:

(1) Surname(s):	Forename(s):
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Previous Surname(s):

Relationship to you:

Date of Birth (dd/mm/yyyy):	
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Address:

(2) Surname(s):	Forename(s):
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Previous Surname(s):

Relationship to you:

Date of Birth (dd/mm/yyyy):	
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Address:

(3) Surname(s):	Forename(s):
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Previous Surname(s):

Relationship to you:

Date of Birth (dd/mm/yyyy):	
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Address:

(4) Surname(s):	Forename(s):
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Previous Surname(s):

Relationship to you:

Date of Birth (dd/mm/yyyy):	
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Address:



2e Details of your brother(s)/sister(s), and half/step brother(s) and sister(s):

(1) Surname(s):		Forename(s):	
Previous Surname(s):			
Relationship to you:			
Date of Birth (dd/mm/yyyy):		If deceased, date of death	
Occupation:			
Address:			
(2) Surname(s):		Forename(s):	
Previous Surname(s):			
Relationship to you:			
Date of Birth (dd/mm/yyyy):		If deceased, date of death	
Occupation:			
Address:			
(3) Surname(s):		Forename(s):	
Previous Surname(s):			
Relationship to you:			
Date of Birth (dd/mm/yyyy):		If deceased, date of death	
Occupation:			
Address:			
(4) Surname(s):		Forename(s):	
Previous Surname(s):			
Relationship to you:			
Date of Birth (dd/mm/yyyy):		If deceased, date of death	
Occupation:			
Address:			

2f Details of parents/step parents or guardians of your spouse/civil partner/partner:

(1) Surname(s)	Forename(s):	
Previous Surname(s):		
Date of Birth (dd/mm/yyyy):	If deceased, date of death	
Occupation:		
Address:		
(2) Surname(s)	Forename(s):	
Previous Surname(s):		
Date of Birth (dd/mm/yyyy):	If deceased, date of death	
Occupation:		
Address:		
(3) Surname(s)	Forename(s):	
Previous Surname(s):		
Date of Birth (dd/mm/yyyy):	If deceased, date of death	
Occupation:		
Address:		
(4) Surname(s)	Forename(s):	
Previous Surname(s):		
Date of Birth (dd/mm/yyyy):	If deceased, date of death	
Occupation:		
Address:		



2g Details of anyone residing at your current address not previously detailed:

(1) Surname(s)	Forename(s):
Previous Surname(s):	
Date of Birth (dd/mm/yyyy):	Occupation:
(2) Surname(s)	Forename(s):
Previous Surname(s):	
Date of Birth (dd/mm/yyyy):	Occupation:
(3) Surname(s)	Forename(s):
Previous Surname(s):	
Date of Birth (dd/mm/yyyy):	Occupation:
(4) Surname(s)	Forename(s):
Previous Surname(s):	
Date of Birth (dd/mm/yyyy):	Occupation:
(5) Surname(s)	Forename(s):
Previous Surname(s):	
Date of Birth (dd/mm/yyyy):	Occupation:

2h Business Interests (you must refer to the Guidance Notes for this section):

Do you have any Business Interests/Commitments?	Yes		No	
If yes, give details:				

3a Personal character:

Section 4 (2) of the Rehabilitation of Offenders Act 1974 (as amended), does not apply to applicants for the Police Service. All convictions must therefore be disclosed.

Have you ever been the subject of any disciplinary action/court martial with HM Forces, or any other professional bodies (including a Police Force)?:	Yes		No	
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Date of incident:	
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Place of incident:	
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Charge made and by whom?:	
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Outcome:	
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Have you ever been investigated/arrested/summonsed/charged/reported/convicted for any crime or offence or received an official police or Procurator Fiscal warning?:	Yes		No	
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If convicted in court, give particulars as follows:

Date of court:	
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Crime or offence:	
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Court at which convicted:	
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Outcome:	
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Are you awaiting the outcome of any police enquiries involving you?	Yes		No	
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If yes, give details as follows:

Date of incident:	
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Place of incident:	
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Nature of charge or complaint:	
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Date of trial or hearing:	
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If any crime or offence committed by you has been disposed of by fixed penalty or Procurator Fiscal Penalty (other than parking tickets), give particulars below:	Yes		No	
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Date of fixed penalty:	
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Nature of crime or offence:	
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RESTRICTED—WHEN COMPLETED



3b Do you have contact with any person(s) who you know or have reason to believe has criminal convictions, or is engaged in criminal activities, or is a person who associates regularly with such:

Yes		No	
If yes please complete the following giving the name(s), address(es) and dates of birth of the person(s) you have contact with, if this information is known to you. Do not however, personally carry out any checks, or cause any checks to be carried out to obtain this information. Please provide details of the nature of contact/association.			
Full Name(s):		Date of Birth (dd/mm/yyyy):	
Association:			
Address:			
Full Name(s):		Date of Birth (dd/mm/yyyy):	
Association:			
Address:			
Full Name(s):		Date of Birth (dd/mm/yyyy):	
Association:			
Address			
Full Name(s):		Date of Birth (dd/mm/yyyy):	
Association:			
Address			

4a Financial circumstances :

Have you, or your spouse/civil partner/ partner, in the past ten years:	Yes	No	Number of times	Date of most recent event/ decision
Had a loan arrangement terminated by your bank/building society etc?				
Had a credit/charge/store or cheque card withdrawn or notified that a card or account had been defaulted?				
Been subject of an adverse Sheriff Court or Court of Session judgement, or a County Court Judgement in England, Wales or Northern Ireland, on financial matters?				
Been party to a trust deed or voluntary agreement registered with the Sheriff Court or Court of Session or a County Court judgement in England, Wales or Northern Ireland?				
Have you ever been registered as bankrupt?				
Have you ever been subject to repossession proceedings?				

4b Financial commitments:

Have you any debt at present, for example, mortgage, loans or credit cards? If yes, give full details as follows:

Nature of debt	Total amount outstanding	Amount/frequency of payments	Any current arrears

4c Do you consider this debt to be manageable if taking up the appointment of Police Constable?

Yes		No	
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5. Declaration

I declare that the information I have provided is true and complete to the best of my knowledge and belief.

I consent to the information being submitted for checking against the records of the Police, Military authorities, Driver and Vehicle Licensing Agency and a Credit Reference Check in accordance with policy.

I confirm that I have taken all reasonable means to inform the persons whose information I have provided have been notified that their details have been submitted as part of the vetting process and that they may be subject to a criminal history check.

I undertake to notify any material changes or additions in the information I have provided in this form, to the Force Vetting Officer.

I understand that if I have knowingly made a false statement or deliberate omission in the information I have provided in this form, I will be disqualified from the recruitment process.

I understand that if any information is found relating to any of the persons named on this form, it will not be disclosed to me.

I also understand that information received during the vetting process is treated in a confidential manner, although no immunity can be granted in respect of discipline or criminal matters revealed. In such cases, information contained within this questionnaire may be disclosed in any subsequent proceedings.

Signed..... Date.....

Name (BLOCK CAPITALS).....

Consent:

(This should be signed by the applicant’s spouse/civil partner/partner (if applicable) where credit reference information is likely to be held jointly. Credit reference checks will only be made where the Force Vetting Officer has legitimate reason to do so.)

I consent to my information being submitted for checking against the records of Credit Reference Agencies.

Signed..... Date.....

Name (BLOCK CAPITALS).....