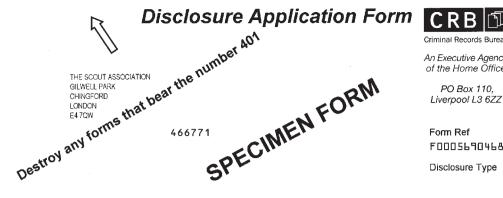
SPSL 4.0 CRBDAF 11/02



An Executive Agency of the Home Office

PO Box 110. Liverpool L3 6ZZ

Form Ref F0005690468

Disclosure Type

Please complete sections A-H in BLOCK CAPITALS; it is important that you use BLACK INK. The Disclosure Application Form Guidance Notes will help you complete this form, however, if you need additional help please contact the application line on 0870 90 90 844

	Applicant's detail	
	Title	Mr Mrs Miss Ms Other
	Surname	
	Forename(s)	ETED 12
	Current address	COMPLIES
	Town/City	SECTION DO NOT EACH At current address since (month and year) Male Female
	County	NON OC NO
	Postcode	At current address since (month and year)
11	Date of birth	Male Female
	National Insurance number	
	Details of position Disclosure is being	n for which ng requested
<u> </u>	Position applied for	LEADER / HELPER
	Organisation name	THE SCOUT ASSOCIATING
	Organisation address	UST DE OU
	Address	GILWELL PARMAN
	1	DO NO CROSS
	Town/City	LEADER / HELPER THE SCOUT ASSOCIATION GILWELL PAR ANTHING CHING OR ORCROSS LON SECTION BORCES E4 . W
	County	LON SEC'
	Postcode	F 4

No.	Additional personal details
20	Surname at birth (if different)
21	Used until (year)
22	Any other surname used SIETELCATE APPLETEDS
23/24	Used from used to COMP CERYOUR MES RECOMS FIRE
25	Any other forename(s) used
26/27	Used from C. T. F. R. NOTORMER OF FIELD WINNERS OF THE
	Surname at birth (if different) Used until Any other surname used Used from
28	TOWNICHY I AME A ENTENTERE SAIV
29	County/District SURN BEEN EN STATE OF THE ST
30/31	different) Used until Any other surname used Used from WISTLE BERTH ET VRNAMES Any other forename(s) used Used from Used from NUSTLE BERTH ET VRNAMES ANDENIE FORMER SURNAMES THE
32	Used trom Any other surname used to Used from Any other forename(s) used to Used from Any other forename(s) used Used from Place of Birth Town/City County/District Born in the UK Nationality Nationality Nationality (year) ATE DETTE DE DE DETTE DE DE DETTE DE DE DETTE DE DETE DE DETTE DE DETTE DE DETE DE DETTE DE DETTE DE DETTE DE DETTE DE DETTE DE DETTE DE D
	EVENTION
33	Home telephone number
34	Work telephone number Preferred contact
35	number and time
	Previous addresses Provide your most recent addresses where you have lived the last 5 years, use continuation sheet if necessary
36	Address
37	TAILS OF ALLARS
38	TOWIN/City PAST IF NECESS!
39	Address Town/City County Postcode Period at previous address Address Address Town/City County Postcode Period at previous address Period at previous address Period at previous address Addr
40/41	Postcode Period at previous SECTION D - YOU ADDRESULUATION (month and year)
42/45	Period at previous address (month and year)
	Additional information This information will help us to process your application more quickly
46	Current marital status Single Married Divorced Widowed Ser Other
47	Number of financially dependent children under age 18
48/49	Bank/Building Sort Account runnber S ARELETED
50	Employment status Employed Self Part All CONT yed Student Other Cross ONE box only Employed Employed DET RECONT yed Student Other
51	Occupancy status Owner Joint Cross ONE box only occupier occup: THESE TO BRenting Other
52	application more quickly Current marital status Single Married Divorced Widowed SeruRED Other Number of financially dependent children under age 18 Bank/Building Sort Account code number ARELETED Society account code number Gross ONE box only Cross ONE box only Occupier Occupie
	SEV

	Referee details	Please provide details of an appropriate referee who has known you professionally or personally for at least 2 years
53	Title	Mr Mrs Miss Ms Other
54	Referee surname	~c0
55	Referee forename(s)	DEQUIRE ,
56	Referee occupation	E NOTED
57	Home address	NIS ARPLETE
58	:	GE DETABE CON.
59	Town/City	THESE TO STATE OF THE STATE OF
60	County	CTION
61	Postcode	SEO .
62	Home telephone	SECTION F-THESE DET BE
63		Parent/Guardian Other
64	Number of years known	
	Payment	
65	SECTION G – LEAVE BLANK	
2.44	Applicant declarate	tion and consent
	After you have checked t	the information provided in Sections A-G, please come he application form in the space(s) provided.
66	Do you have any unspections?	ent criminal Yes No HAVE ORV
67	Please cross this box i additional information	Tyou have supplied with this application OMPLETED SECTIONS OMPLETED SECTIONS
68	Declaration by Applica I confirm that the informa complete and true and ur this purpose is a crim	the information provided in Sections A-G, please come the provided with this application in the space(s) provided with this application form
69	SE LINE CON	THIS BOX SIGNING SPEED Signature of applicant to indicate consent
	to verify m.	organisations for identity verification purposes. AND IT IS ADVISABLE TO SIGN THIS BOX ALSO,
70	Date of Application	AS FEWER IDENTITY DOCUMENTS NEED TO
		OT FORGET THE DATE BE PRODUCED
	After you have signed CRB at this stage.	the form please send it to the person who asked you to apply for a Disclosure - DO NOT return the form to the