

Appendix M

**REQUEST FOR CHECK AGAINST BARRED LIST**

Please email to:  
[Schools.hr@bracknell-forest.gov.uk](mailto:Schools.hr@bracknell-forest.gov.uk)



**Personal Details**

Surname	
Forenames	
Maiden Name/Any other Surname	
Date of Birth	
Full address & postcode	
Position applying for	
<b>This section to be signed by the applicant named above</b>	
I agree to a check against the Barred List being undertaken:	
Signature:	
Date:	

Establishment requesting check	
Contact Name	
E-mail address	

I confirm that there is a DBS check in place and that the individual is transferring from a similar position without a break in service of three months or more  (please tick to confirm)

Please note that if the original DBS check is from outside of BFC or the break is greater than three months a new DBS check will be required.

**HR use only**

Barred List checked (date) .....

I confirm that I have carried out a Barred List check for the above named, and confirm that he/she is not barred.

Name ..... Signature .....