

(To be printed on Organisational Letterhead)

**PLEASE COMPLETE THE FORM IN BLACK OR BLUE INK,
THEN SIGN & UPLOAD USING WEBLINK IN THE EMAIL.**

MR ☐ MISS ☐ MRS ☐ MX ☐ DR ☐

APPLICANT FIRST NAME	
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APPLICANT SURNAME	
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THE APPLICANT'S PERIOD OF EMPLOYMENT WITH YOU	FROM:						
		D	D	M	M	Y	Y

To:	ON-GOING (PRESENT)
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THE APPLICANT'S MOST RECENT JOB TITLE WITH YOU	
THE MAIN DUTIES & RESPONSIBILITIES OF THAT POST:	
HOW LONG HAVE YOU KNOWN THE APPLICANT?	
IN WHAT CAPACITY DO YOU KNOW THEM?	

[illegible]

REFERRING TO THE SUPERVISORY ROLE OF APPLICANT WERE THEY TO USE THE UKFILMNET ONLINE RESOURCES AS DESCRIBED ABOVE, DO YOU BELIEVE THE APPLICANT IS SUITABLE FOR SUCH ACCESS INCLUDING WHETHER THEY ARE SUITABLE TO WORK WITH CHILDREN/VULNERABLE ADULTS AND THAT THEY HAVE NOT BEEN PROHIBITED FROM DOING SO?								YES <input type="checkbox"/>	NO <input type="checkbox"/>
ARE YOU SATISFIED THAT THE APPLICANT IS QTS QUALIFIED AND HAS A CLEAR ENHANCED DBS CERTIFICATE) TO WORK WITH CHILDREN OR VULNERABLE ADULTS?	YES <input type="checkbox"/> NO <input type="checkbox"/>	QTS NUMBER							
TO THE BEST OF YOUR KNOWLEDGE, HAS THE APPLICANT EVER HAD AN ALLEGATION MADE AGAINST THEM, WHICH WAS FOUNDED, IN REGARD TO HIS OR HER BEHAVIOUR TOWARDS CHILDREN?								YES <input type="checkbox"/>	NO <input type="checkbox"/>
HAS THE APPLICANT BEEN THE SUBJECT OF DISCIPLINARY ACTION FOR WHICH PENALTIES OR SANCTIONS REMAIN IN FORCE?								YES <input type="checkbox"/>	NO <input type="checkbox"/>
IF THE APPLICANT WAS APPOINTED AFTER 2/9/13 HAVE YOU CONDUCTED A CHECK THAT CONFIRMS THEY ARE NOT ON THE TEACHING REGULATION AGENCY (PREVIOUSLY NCTL) PROHIBITED LIST?								YES <input type="checkbox"/>	NO <input type="checkbox"/>
IF THE APPLICANTS IS A TIER 2 SKILLED WORKER WHO HAS LIVED ABROAD FOR 12 MONTHS OR MORE IN THE LAST 10 YEARS CAN YOU CONFIRM THEY HAVE PROVIDED YOU WITH AN OVERSEAS CRIMINAL RECORD CERTIFICATE?								YES <input type="checkbox"/>	NO <input type="checkbox"/>
IS YOUR ORGANISATION A BRITISH SCHOOL ABROAD, M.O.D. OR DUBAI SCHOOL?	YES <input type="checkbox"/> NO <input type="checkbox"/>	IS YOUR ORGANISATION SUBJECT TO INSPECTIONS BY A RECOGNISED INSPECTION PROVIDER AS SPECIFICALLY DEFINED IN NOTE 1 BELOW? <small>(NOTE 1)</small>					YES <input type="checkbox"/>	NO <input type="checkbox"/>	

REFEREE'S (YOUR) NAME:		POSITION:		EMAIL:	
SIGNATURE OF REFEREE:					
ORGANISATION REGISTERED ADDRESS:		ORGANISATION WEB ADDRESS	www.		
ORGANISATION NAME:		UKPRN NUMBER (NOTE 2)			

NOTE 1: IN ENGLAND: THIS MEANS OFSTED, IN WALES THIS IS WELSH ESTYN IN SCOTLAND IT IS EDUCATION SCOTLAND, IN NORTHERN IRELAND IT IS THE DEPARTMENT OF EDUCATION, FOR OVERSEAS SCHOOLS THIS MEANS AN INSPECTION PROVIDER THAT HAS BEEN INSPECTED AND APPROVED BY A ONE OF THE UK'S DEPARTMENT FOR EDUCATION'S LIST OF RECOGNISED OFSTED INSPECTORATES DEEMED FIT FOR PURPOSE. <https://ukfilmnet.org/welcom/docs/overseas-inspection.pdf>

NOTE 2: UKPRN NUMBER CAN BE LOCATED ON DfE "G.I.A.S." USING [HTTPS://WWW.GOV.UK/GUIDANCE/GET-INFORMATION-ABOUT-SCHOOLS](https://www.gov.uk/guidance/get-information-about-schools)