**Application for a Police Check on an Individual by West Yorkshire Police**

**Please note that the Disclosure Unit is unable to process ’Urgent’ requests, requests will be processed within the agreed timescales of 30 days.**

**All boxes *must* be complete, incomplete forms will be returned un-processed**

|  |  |
| --- | --- |
| **Local Authority** |  |
| **Social Worker (Name)** |  |
| **Social Worker Team** |  |
| **SW email address** |  |

Please be aware that any information disclosed is based on full and accurate information being provided. West Yorkshire Police cannot accept responsibility if incorrect/insufficient information and/or details are provided to us.

**What is the Current Status of the Child – please outline the request and any specific concerns**

|  |  |
| --- | --- |
| **Reason for Check** | **Please indicate clearly** |
| **Pre-Birth Assessment (EDD must be supplied)** |  |
| **Court Report** |  |
| **Child on Child Protection Plan-Adult with Contact** |  |
| **Contact with Looked After Child** |  |
| **Child to be Placed at Home with Parents under Placement with Parents Regulations** |  |
| **Child to be returned home/placed with others** |  |
| **Other (please specify)** |  |
| **Provide reason for request and outline specific concerns if any – Ensure that the request is focused and identifies evidence held by police that is central to proceedings:** | |

**Please list below the names of the child/ren concerned**

|  |  |  |  |
| --- | --- | --- | --- |
| **Forename** | **Surname** | **Date of Birth** | **Electronic ID Number** |
|  |  |  |  |
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**Please note that *all* parties to be checked in relation to the nominated child/ren should be entered**

**on this form by copying and pasting as many additional boxes as are required. *For foreign nationals***

***please see advisory note 9.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Party 1. Fields marked with an asterisk\* are essential** | | | | |
| **\*Forename/s** | | **\*Surname** | | **Previous Names:** |
|  | |  | |  |
| **\*Date of Birth** |  | | **Place of Birth if known** |  |
| **\*Current Address:** | |  | | |
| **Previous Address/es if available** | |  | | |
| **\*Adult’s Relationship to Child/ren:** | |  | | |

|  |  |
| --- | --- |
| **ID checked Y/N** |  |
| **Previous Information Requested? Y/N & Date** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Party 2. Fields marked with an asterisk\* are essential** | | | | |
| **\*Forename/s** | | **\*Surname** | | **Previous Names:** |
|  | |  | |  |
| **\*Date of Birth** |  | | **Place of Birth if known** |  |
| **\*Current Address:** | |  | | |
| **Previous Address(es) if available** | |  | | |
| **\*Adult’s Relationship to Child/ren:** | |  | | |

|  |  |
| --- | --- |
| **ID checked Y/N** |  |
| **Previous Information Requested? Y/N & Date** |  |

*I confirm that this request has been checked for relevancy and accuracy*

*SPOC: DATE:*

**West Yorkshire Police are reliant on each force managing and updating the Police National Database and as such have no jurisdiction over data held on this system.**

***For WYP use only:***

|  |  |  |
| --- | --- | --- |
| **PNC Y/N - Name** | **PND Hit - Name** | **PND – Force, Relevancy & Disclosure** |
|  |  |  |
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|  |
| --- |
| With reference to your enquiry, West Yorkshire Police hold the following information: |

*This document contains personal information subject to the Data Protection Act 1998 and should not be used or*

*disclosed unlawfully. To abide by the regulations please ensure the following caveats are followed:*

*Do not copy the information.*

*Do not show / copy this information to any of the concerned parties (although the information may be discussed with the concerned party’s for clarification)*

*Do not send the information to a third party by insecure means.*

*Always store this information securely.*

*This information is provided on the understanding that it is managed with due regard to the sensitive nature of the information. I am satisfied that the information provided is in accordance with the procedures agreed in the guidance for the Management of Police Information and agreed Codes of Practice and I have authorised the notification of this information as being relevant for the purpose outlined in the guidance.*

*Please note that the information provided (i.e. modus operandi) is recorded at the time the incident is reported. This may be subject to change once an investigation is complete. Further enquiries may need to be made).*

*The document should be retained in accordance with the Data Protection Act and its attendant protections. In particular, the document should be destroyed when its retention is no longer warranted, under the terms of the Act.*

***Force representative*** Insert name ***Date*** Insert date

This form will be accepted from and submitted back to the following secure email addresses only:

[Policecheck.SPOC@Wakefield.gcsx.gov.uk](mailto:Policecheck.SPOC@Wakefield.gcsx.gov.uk)

Policecheck.SPOC@Calderdale.gcsx.gov.uk

Policechecks.SPOC@Leeds.gcsx.gov.uk

Policecheck.SPOC@Kirklees.gcsx.gov.uk

Policecheck.SPOC@Bradford.gcsx.gov.uk