



The ARC Disclosure Service

Employer's Registration Form (PLEASE PRINT THROUGHOUT)

Name of Manager:

Name of Organisation/HQ:

Address:

Post Code

Tel No:

Email address:

We would like to register with ARC's Disclosure service and confirm the following procedures are in place (please tick as appropriate):

- When advertising for vacancies which require a DBS disclosure check we will make this known in our recruitment literature.
- We have a written policy on the recruitment of ex-offenders.
- We have a written security policy concerning the handling and safe-keeping of information.
- We have read and will comply with the DBS Code of Practice
- I understand I will be invoiced on a monthly basis as required.

Invoice Address - *if different*

Name:

Address:

Post Code

EMAIL address for Invoices:

P.T.O.

• I confirm that our organisation carries out 'regulated activity' working with:

Children (under 18 years of age)

Vulnerable adults (aged 18+)

Both Vulnerable Adults and Children

- The following person/s has/have been nominated by this organisation to complete Section ID & Y on the on-line DBS application form:

Name:

Email Address:

Name:

Email Address:

Name

Email Address:

Name:

Email Address:

Please return this form: via email to disclosureservice@arcuk.org.uk

or

***ARC Disclosure Service, 10a Marsden Street, Chesterfield
S40 1JY***