**Logo, company name

Description automatically generatedDBS Form for New or Cancelled Portal User: Single Access**

This form is for single schools only. If you are a Trust and you require access to the Trust or multiple schools within the Trust, please complete the Trust Access Form.

Please complete this form to inform us of new users and cancelled DBS Portal users.

Please be aware that this is **not** a DBS application form.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DfE number\*** |  | | | | | **School customer number\*** | | | |  |
| **School name\*** |  | | | | | | | | | |
| **Requesting\*** |  | Access for a new portal user | | | |  | Access to be cancelled for a current portal user | | | |
| **Employee number** | | |  | | | | | | | |
| **First name\*** | | |  | | | | | **Last name\*** |  | |
| **Date of birth\*** | | |  | | | | | **Job title\*** |  | |
| **Direct telephone number\*** | | | |  | | | | | | |
| **User’s work email \***  This email must only be used by the DBS Portal user | | | | |  | | | | | |
| **User’s signature** Please upload a copy of your signature to confirm that you have authorised this | | | | |  | | | | | |
| **Date** | | | | |  | | | | | |
| **Name of Headteacher authorising on behalf of the School\*** | | | | |  | | | | | |
| **Headteacher’s authorisation signature\*** The Headteacher must have authorised this DBS Portal request. Please upload a copy of the Headteacher’s signature to confirm that this has been authorised. | | | | |  | | | | | |

**New User**

**Complete this section if requesting a new user**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Does your Trust require a DBS Vulnerable Adults Barred List Check?** |  | Yes |  | No |
| **Do you require access to DBS invoices?** If the answer is no, please complete the DBS Invoice Contact Form to confirm who at the School or Trust, should have access to DBS invoices. |  | Yes |  | No |

I confirm that I have read and accept the [EPM DBS Portal Terms of Use](https://f.hubspotusercontent30.net/hubfs/4094189/EPM%20DBS%20Portal%20Terms%20of%20Use.docx)

**Cancelled User**

**Complete this section if requesting a cancelled user**

|  |  |
| --- | --- |
| **Please enter date for access to end** |  |