Logo, company name

Description automatically generatedSafer Recruitment: Employment Risk Assessment

[School Name]

This form is for use in exceptional cases, where the Headteacher wishes to consider an exemption from the requirement to obtain a valid DBS certificate prior to an employee starting work. It must not be used as an alternative to processing DBS applications at the earliest possible date. The form will normally be completed by the Headteacher and will be retained on the employee’s personal file indefinitely.

Please note that an Enhanced check for Regulated Activity must be carried out in every case prior to an employee beginning work in school.

|  |  |
| --- | --- |
| Candidate’s name: |  |
| Enhanced DBS check requested: |  |
| Enhanced DBS check received: |  |
| Date Barred List check processed: |  |
| Job title: |  |
| Start date: |  |
| Date of interview: |  |
| Date DBS form submitted: |  |
| Has a Certificate of Good Conduct been received, where required and for teaching positions a letter of professional standing from the professional regulatory authority in the country (or countries) in which the applicant has worked? |  |
| Name of current/last employer: |  |
| Length of service with current/last employer: |  |
| Has there been a break in employment since last employed? |  |
| Has this been satisfactorily explained by the candidate? |  |
| Has the candidate declared any previous cautions/convictions/bindovers/warnings not protected by filtering? |  |
| Have these been satisfactorily explained by the candidate? |  |
| Has advice been sought from EPM if there are any concerns about the employee’s background? |  |

Headteacher’s Declaration:

* I confirm that this job is essential to the successful operation of the school.
* I confirm that I have obtained references from two referees, at least one of whom has recent and relevant knowledge of the employee in a work context. I am satisfied that the referee has no reservations as to the applicant’s suitability to work with children and young people.
* I confirm that medical clearance has been obtained for this appointment.
* I confirm that I will ensure appropriate levels of supervision and/or monitoring will be maintained at all times (for example, unplanned visits by senior staff to employee’s work area and avoiding the person working alone with individual children).
* I confirm that the established child protection procedures, standards and ethos of this school provide clear expectations of all staff in matters of child protection.
* I confirm that as part of the employee’s induction, the above standards and expectations will be made clear.
* I confirm that the employee will not be given responsibility for high-risk activities e.g. external visits or residential trips until appropriate DBS clearance is obtained.
* I have discussed the details of this appointment and assessed the potential risk(s) with my Chair of Governors.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed (Headteacher) | |  | | |
| Name |  | | Date |  |

Decision: Exemption endorsed/not endorsed (please delete as appropriate)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed (Chair of Governors) | |  | | |
| Name |  | | Date |  |