



fitmumsTM
and friends

Self-Declaration and Disclosure Form

Date agreed

August 2025

Date due for review

August 2027

Produced by

Vickie Hillier – Deputy Chief
Officer

Reviewed by

Sam Barlow – Chief Officer

Private and confidential

All information will be treated as confidential and managed in accordance with relevant data protection legislation and guidance. You have a right of access to information held on you under the Data Protection Act 2018.

Free confidential advice can be sought from the organisations below to help you understand whether to disclose certain criminal record information:

[Nacro](#)

[Unlock](#)

Volunteer information

Name

Address

Contact no(s)
(Parent or carer if U16)

Email address
(Parent or carer if U16)

Date of birth

Role(s) applying for
(and club if relevant)

Part 1 – Identification

For completion by an organisation representative. Proof of name, address and date of birth must be shown. Please tick the box(es) relating to the document seen. You do not need to record any of the information from the documents.

I confirm that I have seen at least three identification documents relating to this person, and I confirm to the best of my ability that these are accurate.

- | | | |
|--|--|--|
| <input type="checkbox"/> UK driving licence | <input type="checkbox"/> UK passport | <input type="checkbox"/> Biometric residence permit |
| <input type="checkbox"/> Birth certificate | <input type="checkbox"/> Benefit statement | <input type="checkbox"/> Financial statement |
| <input type="checkbox"/> EU National ID | <input type="checkbox"/> HM Forces ID | <input type="checkbox"/> Council Tax statement |
| <input type="checkbox"/> Utility bill | <input type="checkbox"/> P45/P60 | <input type="checkbox"/> Credit card statement |
| <input type="checkbox"/> Firearms licence | <input type="checkbox"/> Bank statement | <input type="checkbox"/> Letter of sponsorship from employer |
| <input type="checkbox"/> Adoption certificate | | |
| <input type="checkbox"/> Marriage/Civil partnership certificate | | |
| <input type="checkbox"/> Letter from local or central government, government agency or local council dept giving entitlement e.g. Department for Work and Pensions, Work permit or visa. | | |

Signature of organisation representative

Print name

Date

Part 2. Declaration of individual

To be completed by the volunteer.

1. Do you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974?

No ☐
Yes ☐

Please provide further information:

2. Do you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020?

No ☐

Yes ☐

Please provide further information:

3. Have you been formally charged with any offence in any country which has not yet been disposed of?

No ☐

Yes ☐

Please provide further information:

4. Are you currently subject to any criminal investigations or pending prosecutions by the police in any country which may have a bearing on your suitability for this position?

No ☐

Yes ☐

Please provide further information:

5. Have you ever been known to any children's or adult's services departments or the police as being a risk or potential risk to children or vulnerable adults?

No ☐

Yes ☐

Please provide further information:

6. Have you been the subject of any formal action, disciplinary investigation and/or sanction by any organisation due to concerns about your behaviour towards children or vulnerable adults?

No ☐

Yes ☐

Please provide further information:

7. Have you ever been dismissed for misconduct from any employment, volunteering or other position previously held by you, in circumstances which may have a bearing on your suitability for the position?

No ☐

Yes ☐

Please provide further information:

8. Are you currently subject to any fitness practise investigations or proceedings by a regulatory, governing, or licensing body in any country which may have a bearing on your suitability for this position?

No ☐

Yes ☐

Please provide further information:

Part 3: Confirmation of the declaration

To be completed by the individual volunteer. Please tick the boxes below and then sign this form.

☐ I agree that the information provided here may be processed in connection with recruitment purposes and I understand that my volunteering position may be withdrawn if information is not disclosed by me and subsequently comes to the organisation's attention.

☐ By signing this form, I confirm that the information I have provided is complete and true and understand that knowingly making a false statement may be a criminal offence.

☐ I agree to inform Fitmums and Friends (and UK Athletics if relevant) within 24 hours if I am subsequently investigated by any agency or organisation in relation to concerns about my behaviour towards children, young people or vulnerable adults.

Volunteer signature

Volunteer name

Date

Parent/Carer signature (if U18)

Parent/Carer name (if U18)

Date