Part 3B: a written form of authority of a significant other. e.g. adult household member, including adult birth children.

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| **NAME OF APPLICANT(s)/CARER (initial and surname only)** | Click here to enter text. |
| **NAME OF SIGNIFICANT OTHER** | Click here to enter text. |
| **DECLARATION**  |
| I have signeda written form of authority to enable enquiries to be made and I give my permission to Fostering People, or their authorised representatives, to obtain references and view relevant files in connection with:* **Disclosure and Barring Service (DBS).**
* **Local Authority Social Services Department checks including, potentially, employment records, client records and child protection records.**
* **Ex-partner and Birth Children References.**

**I agree that in making any of the enquiries above in connection with my application to be considered as a *Significant Other*, Fostering People or their authorised representative have my permission to request disclosure of relevant information as may be held by any of the individuals, agencies or authorities listed above.****I also agree that information obtained by Fostering People in the course of this risk assessment may be shared with the Foster Carer concerned and other public authorities (or other agencies who may be legitimately discharging statutory functions in relation to the care and protection of children) in accordance with the provisions of current Data Protection and Child Protection legislation.****I agree to produce a copy of my Disclosure and Barring Service Check certificate when requested for examination and copy by Fostering People staff, as required.** *The process of assessment requires Household members over the age of 18 to undertake a Criminal Record check with Disclosure & Barring Services. When Fostering People are notified that the disclosure contains information of convictions/cautions the household member will be required to produce the certificate for examination within 5 days of receipt (a copy may be required for the purpose of risk assessment). The assessment cannot proceed until this process is completed. Note: Should either the applicant or household member intend to challenge the information disclosed by DBS a risk assessment of the information can be undertaken by Fostering People to avoid delay in the assessment process, as some minor convictions/cautions do not necessarily indicate that applicants/Household members are ‘unsuitable’.**On occasion, there may be a requirement for additional checks to be undertaken in which case your specific written form of authority will be sought.* |

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| **I understand that this information and references will be used as part of the risk assessment.** **I understand that follow up enquiries may be made of any of the above agencies and referees should it be deemed necessary, by Fostering People, the assessing Social Worker on behalf of Fostering People, the Medical Advisor to Fostering People, and/or at the request of the Fostering People - Fostering Panel.****I understand that some or all of these enquiries will be renewed on a regular basis.****I declare that all the information I have provided is true to the best of my knowledge and belief, and that I have not withheld any relevant information. I understand that if I have deliberately made any false statements or intentionally omitted any information I am liable to have my application rejected.****Personal data supplied on this form will be held on and/or verified by reference to information already held on computer. In signing this form I give permission to Fostering People to access, store and process this data, in accordance with the provisions of the Data Protection Act 2018 and other related child protection legislation. I understand that Fostering People will take all reasonable care to ensure that data held is maintained safely and securely according to current legislation and good professional practice.**I understand that Fostering People is required to pass to the statutory child protection authorities any information, which Fostering People considers relevant to ensuring the current or future safety or wellbeing of any child. In most situations this would involve discussion with and agreement from the applicant. In exceptional circumstances this could happen without such agreement, where Fostering People believe it to be in the interests of specific children or in the public interest. |
| Please tick the checkbox to confirm you have read and understood and agree to the above.[ ]  I confirm I have read, understood and agree to the above Name: Click here to enter text. Signature Click here to enter text.Date: Click here to enter a date.  |