

Wellbeing Protection Officer (WPO) Agreement and ID Verification

** Please note that typed signatures are acceptable on this form and that no copies of ID should not be taken or submitted to Bowls Scotland. ID should be viewed and verified by an appropriate Club member **

| This section to be completed by proposed WPO. | Tick to confirm |
|---|-----------------|
| I understand and agree to abide by the <u>Disclosure Scotland Code of Practice.</u> , as laid out in Bowls Scotland policies | |
| I agree that it is an offence to share the disclosure information that I receive with anyone who is not entitled to access it in the course of their duties | |
| I agree to carry out required ID checks for every PVG application submitted. | |
| I will inform Bowls Scotland if I leave the role of WPO | |
| I understand that if a PVG Scheme Member's status changes to barred or if they are moved to consideration for listing, Bowls Scotland will notify the WPO to advise the appropriate action to take. | |
| I agree to notify Bowls Scotland if a PVG Scheme Member leaves my club or is no longer in the role that they were checked for. | |
| I understand that information provided on a disclosure must only be used for the purpose it was provided for (to make a recruitment decision) | |

| Wellbeing Protection Officer (WPO) ID VERIFICATION | | | | | | | | |
|--|------------|-------------|-------|-------------|----------------|---|--------|----------|
| The following | ig se | ction to be | compl | eted by pro | posed WPO. | | | |
| Club Name | ; | | | | | | | |
| | | | | | WPO DETAILS | | | |
| Title | | | | | First Name | | | |
| Middle Name/s | | | | | Surname | | | |
| | | | | | | | | |
| Address (in postcode | | | | | | | | |
| Phone Number | | | | | E-Mail Address | | | |
| Date of Bir | t h | | | | Sex | M | Iale □ | Female □ |



| The following as stigned by complete disorder WDO | | | |
|---|----------------|--|--|
| The following section to be complet | ed by the WPO. | | |
| If taking over the role of WPO, | | | |
| please provide the name of the | | | |
| WPO you are replacing | | | |
| If acting as second WPO, please | | | |
| provide the name of the WPO you | | | |
| will work with | | | |
| Are you already a PVG Scheme | | | |
| Member? | | | |
| | | | |
| If yes, is this PVG for Bowls | | | |
| Scotland, or a Bowls Scotland | | | |
| affiliated club? | | | |
| If yes, please provide PVG | | | |
| membership number | | | |
| If yes, please provide date PVG | | | |
| issued | | | |
| Please list any other Bowling Clubs | | | |
| you are a member of, intend to | | | |
| coach or undertake other regulated | | | |
| work for | | | |

PVG & Disclosures - Consent Form in favour of Bowls Scotland

I, the undersigned, acknowledge that in order for me to perform "regulated work" with children and/or protected groups within my club, I must undertake a suitability assessment in terms of the PVG legislation and/or take steps in connection with any need for me to be a member of the PVG scheme as described in the PVG legislation. These steps are taken to ensure that Bowls Scotland and the club that I am a member of and where I will do my regulated work, adheres to good practice in respect of safeguarding and maintaining safe environments for sport.

I understand that the suitability assessment is primarily to check I am not barred from undertaking "regulated work" and lawfully able to perform a "regulated role" within the club and within the sport of Lawn Bowls. I acknowledge I may require to be a member of the PVG scheme in due course. I understand that Bowls Scotland are assisting my club by undertaking the required steps to have my application made and processed.

In terms of data protection legislation, I am informed that the SGB and my club are relying on its "legal obligation" to adhere to legislation designed to protect children and vulnerable groups, in order to process my personal data. This personal data will include my name, date of birth, club and vetting information, which may include criminal offence information and / or any other vetting information held and released by Disclosure Scotland (which together is known in this form as "PVG data").

Whilst some of this PVG data may be provided to the club directly by me in my application form and declarations made, some will be provided by Disclosure Scotland, both directly and indirectly via governmental organisations and Bowls Scotland. I acknowledge and agree that Bowls Scotland may from time to time assist my club/s in identifying what checks may be required; what steps should be taken and the making of any application for a disclosure check, or for membership of the PVG scheme.

Further details can be found in our privacy notice https://www.bowlsscotland.com/about-us/data-protection



Bowls Scotland and my club may wish to share my PVG data (the information released by Disclosure Scotland about me) for the purposes of compliance, support, guidance and assistance in completing the suitability assessment in terms of the PVG legislation and to take any steps in connection with that assessment. Sharing my PVG data between my governing body Bowls Scotland and club may happen in the future if any additional PVG data is provided or if my PVG data needs to be reviewed again in connection with regulated work.

I consent to the acquisition and sharing of PVG data between Bowls Scotland and my club/s in order to:-

- I. Permit the assessment of my suitability to be conducted by the club with the support, guidance and assistance of Bowls Scotland in making this determination for the purposes of the PVG legislation;
- 2. Assist the club to take any steps in connection with my suitability assessment including advise in relation to the same: and
- 3. Allow the club to share information in future when received in connection with any aspect of the PVG legislation.

Further notes are set out below.

Notes:-

- The PVG legislation includes the Police Act 1997; Protection of Vulnerable Groups (Scotland) Act 2007; and the Disclosure Scotland Act 2020.
- Data protection legislation includes the UK GDPR and the Data Protection Act 2018.
- PVG data includes criminal offence data and includes personal data relating to criminal convictions and
 offences or related security measures. It also includes data relating to the absence of convictions.
 Depending on the type of disclosure requested, further vetting information may be provided.
- Further information is available from:-

Bowls Scotland: safeguarding@bowlsscotland.com;

https://www.mygov.scot/organisations/disclosure-scotland

• If consent is to be competently withdrawn it must be withdrawn in writing and set out with an acknowledgement, to the SGB, that your ability to carry out regulated work may be impacted.

I understand that I may withdraw my consent to the sharing and processing of information at any time. I acknowledge that if I do withdraw my consent it is likely that I will not be permitted to undertake regulated work or perform a regulated role.

| Signature: | |
|------------|--|
| Date: | |



| VERIFIERS DETAILS | | | | | | |
|---|---|--------------------------|-----------------|----------|-----------------------------|-----------------------------------|
| The following sec Management Co | • | leted by the verifi | er who n | nust be | a m | ember of the club's Board or |
| ID check: | | | | | | |
| (please mark appr | opriate boxes) | | | | | |
| | of ID should be che ent address. These | | | | <mark>ioto</mark> | graphic, and all must contain the |
| Photo ID: | | | | | | |
| Passport □ | | Driving Licence □ | | | National Entitlement Card □ | |
| | | | | | | (e.g bus travel card) |
| Proof of Address: | | | | | | |
| Phone Bill □ | Utility Bill □ | Bank Statement □ Other □ | | | _ | |
| | | | (Please state:) | | | |
| Other acceptab | le ID: | | | | | |
| Driving licence without photo □ Birth Certificate □ | | | | | | |
| I confirm that I | I confirm that I have met with and positively identified the above named WPO. I have checked in the | | | | | |
| manner recomm | mended by Disclosu | re Scotland, the a | authenti | icity of | the | documentation supplied, and the |
| | information recorded on this form. | | | | | |
| Verifier | | | Date s | igned | | |
| Signature | | | | | | |
| Print Name | | | Position Club | n in | | |
| | | | Club | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| WPO Declarati | ion (to be completed l | by proposed WPO) | | | | |

I certify that all information contained in this form is true and correct to the best of my knowledge and understand that providing false information or omissions may lead to an investigation by Bowls Scotland/Disclosure Scotland.

| WPO signature | |
|---------------|--|
| Date signed | |

Please return this form alongside the SDA via email to safeguarding@bowlsscotland.com.

If there are any changes to the information above please inform Bowls Scotland immediately.