

# Quality Improvement & Support Team

Early Years Learning and Childcare Service



Calderdale  
Council

## Resource 3

### Staff Suitability Declaration Form

In accordance with regulations made under Section 75 of the Childcare Act 2006 and the EYFS 2017, this is a form that should be completed by all new staff, volunteers and students, once they have been offered a position within .....

In addition this form will be completed annually; it is also your responsibility as an employee to update your manager to any changes in your personal circumstances that may mean you become disqualified from working with children. You will also be asked within your supervision if your personal circumstances have changed.

<https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006/disqualification-under-the-childcare-act-2006>

Have you received an order, determination, conviction, or other ground for disqualification from registration under regulations made under section 75 of the Childcare Act 2006 either before or during your time in this provision?	Yes/No
Have any persons within your household received an order, determination, conviction, or other ground for disqualification from registration under regulations made under section 75 of the Childcare Act 2006 either before or during your time in this provision?	Yes/No
Are you or anyone in your household “disqualified” for caring for children?	Yes/No
Have you or anyone in your household committed any offences against children?	Yes/No
Have you or anyone in your household committed any offences against an adult?	Yes/No
Have you or anyone in your household ever been barred from working with children?	Yes/No
Have you or anyone in your households children been “looked after”	Yes/No

by statutory services?	
Have you or anyone in your households children been subject of a child protection order?	Yes/No
Have you or anyone in your households name been placed on the DBS barring list?	Yes/No
Do you have any medical conditions that could affect your ability to care for children?	Yes/No
Are you taking any medication/substances that may affect your ability to care for children?	Yes/No

If you have answered yes to any of the questions please provide details below:

I understand that if my personal circumstances change, regarding any of the above questions, it is my responsibility to inform my manager as soon as reasonably practicable

Signed:

Date: