FORM 6

SAFEGUARDING – CHILDREN EMPLOYEE ACCEPTANCE FORM

I confirm that I adhere to the Franciscan Child Safeguarding Policy and Procedures, and I am prepared to participate in any required training provided in this area.

Full name (print): .....

Signed: .....

Date: .....

I have never been investigated by any police force or statutory health authority or a previous employer in relation to complaints made concerning my treatment of children or young people.

I agree to the Guardian or Superior, line manager or the Board of Management, or organisation seeking a certificate from the Garda Síochána to the effect that I have not been the subject of an investigation, prosecution or conviction relating to the neglect or the physical, emotional or sexual abuse of children.

Full name (print): .....

Signed: .....

Date: .....

NOTE – WHEN SIGNED, THIS FORM IS TO BE PLACED IN THE EMPLOYEES PERSONAL FILE