



Request For Exemption (Chaplaincy)

WHERE NO CRIMINAL RECORD CHECK CAN BE OBTAINED.

TO: Incumbent Name
FROM: Safeguarding Officer Name

01

Applicant details

Name
Date of birth (DD/MM/YYYY)
Role(s)

02

Country information

Countries visited for longer than one month (since the age of 16)

Country

From (MM/YYYY)

To (MM/YYYY)

03

Exemption Request Details

Country Name
Reason for Exemption Request:

04

Other Safeguarding Checks and References

Unblemished Confidential Declaration Form (CDF) received? **Yes** **No**
Unblemished Criminal Record Checks received from:

Safeguarding Reference received in lieu of a criminal record check certificate? Yes No	
How many References obtained?	
Name of Referee	
Known in the capacity of:	
From (MM/YYYY)	To (MM/YYYY)
During what period?	
Date of Reference (DD/MM/YYYY)	
Date Reference Verified: (DD/MM/YYYY)	
Any concerns arising from the Reference? Yes No	
Details of any Concerns:	
Other relevant information:	

05

Authorisation of the Request for Exemption	Incumbent Signature	Print name
		Date (DD/MM/YYYY)
	Safeguarding Officer Signature	Print name
		Date (DD/MM/YYYY)

06

Safeguarding Officer Comments	
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