

## Vetting Application

**This form is designed to be used for disclosure purposes relating to any questions asked in connection with any profession, office, employment, occupation, licence, certificate or permit of any kind in Gibraltar only.**

### Criminal Procedure & Evidence Act 2011 (CPEA 2011)

#### PART 25 – REHABILITATION OF OFFENDERS

All persons involved in the completion and submission of this application form should acquaint themselves with Part 25 of the CPEA 2011 and in particular Section 616 – Exceptions to Rehabilitation.

It is important that applicants are made aware that subject to certain exceptions as mentioned in this section, a person is to be informed that by virtue of this section, spent convictions are to be disclosed.

The full CPEA 2011 can be located in [Laws of Gibraltar website](http://www.laws.gi).

The following links contain the relevant extracts of the CPEA 2011 [Part 25](#) and [Schedule 11 & 12](#) as mentioned above.

#### Fee

A fee of £10 is applicable for this service.

Payment for this fee is to be decided between the employer / prospective employer and the applicant(s). Who is to settle the fee is not determined by the RGP.

#### Proof of Identity

Section 1 asks you to give personal information about yourself which will help the Commissioner of Police to confirm your identity. He has a duty to ensure that information he holds is secure and he must be satisfied that you are who you say you are.

Section 4 asks you to provide evidence of your identity by producing copies of documents(s) with your application.

### **Registration of Authorised Signatory**

A Company / Non-Profit Organisation Registration application form must be completed to register the Company / Non-Profit Organisation and assigned authorised signatories for the vetting of prospective employees (*Please see section 6.1*)

### **Form Guidance**

This form can be completed digitally, and any fields that are not applicable should be marked N/A. Original or scanned signatures are required throughout. If you are printing off this form and filling it in by hand, PLEASE USE BLOCK CAPITALS (clearly and legibly) using BLACK INK only, throughout the form to assist in processing your request.

Complete **Sections 1 – 6 overleaf**.

### **Form Submission**

This form should be submitted to us electronically via [datarequests@royalgib.police.gi](mailto:datarequests@royalgib.police.gi) by the Gibraltar registered employer.

### **Processed vetting application**

The results of all processed vetting applications will be sent to the employers via email.

## OFFICIAL – PERSONAL (WHEN COMPLETE)

Please note that fields marked \* are mandatory.

### Section 1 - Personal information about you (to be completed by the Applicant)

|                                                                                                                                                                                                                                                                                                                                                                                             |                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <b>1.1 * Title:</b>                                                                                                                                                                                                                                                                                                                                                                         | Choose an item. (if other, please specify) Click or tap here to enter text. |
| <b>1.2 * <u>ALL</u> forename(s)/given name(s):</b>                                                                                                                                                                                                                                                                                                                                          | Click or tap here to enter text.                                            |
| <b>1.3 * Surname/Family name:</b>                                                                                                                                                                                                                                                                                                                                                           | Click or tap here to enter text.                                            |
| <b>1.4 * Have you ever used or been known by any other names?</b>                                                                                                                                                                                                                                                                                                                           | Choose an item.                                                             |
| If you have answered Yes to the question above, please provide a list of all your previous names below, including <b>maiden/married</b> names, names prior to and after change by deed poll, and name at birth if different from the above. Failure to answer this question will delay your request. If you run out of space, please supply any additional information on a separate sheet. |                                                                             |
| <b>Previous/former name(s):</b>                                                                                                                                                                                                                                                                                                                                                             |                                                                             |
| Click or tap here to enter text.                                                                                                                                                                                                                                                                                                                                                            |                                                                             |
| <b>1.5 * Date of birth: (dd/mm/yyyy)</b>                                                                                                                                                                                                                                                                                                                                                    |                                                                             |
| <b>1.6 * Place of birth: Village/town:</b>                                                                                                                                                                                                                                                                                                                                                  | Click or tap here to enter text.                                            |
| Country:                                                                                                                                                                                                                                                                                                                                                                                    | Click or tap here to enter text.                                            |
| <b>1.7 * Gender:</b>                                                                                                                                                                                                                                                                                                                                                                        | Choose an item.                                                             |
| <b>1.8 * Passport or Identity Card No.</b>                                                                                                                                                                                                                                                                                                                                                  | Click or tap here to enter text.                                            |
| <b>1.9 * Country issuing Passport or Identity Card:</b>                                                                                                                                                                                                                                                                                                                                     | Click or tap here to enter text.                                            |

### Section 2 - Contact details

|                                                                                                                       |                                  |
|-----------------------------------------------------------------------------------------------------------------------|----------------------------------|
| <b>2.1 * Email address:</b>                                                                                           | Click or tap here to enter text. |
| <b>2.2 * Daytime telephone No.</b><br>(Please make sure that you include local/area or international dialling codes.) | Click or tap here to enter text. |

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## OFFICIAL – PERSONAL (WHEN COMPLETE)

The information supplied in connection with this application will be used for the purpose of administering this request and to ensure the accuracy of Police systems.

Last Revised:  
June 2024

### Section 3 - Address history

**3.1 \* Current address:** This is the physical address at which you reside (not a PO Box) and should be shown on your proofs of address.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

**Postcode:** Click or tap here to enter text.

**Date from:** (mm/yyyy)

**3.2 \* Previous addresses:** If the information you are requesting refers to previous addresses you have lived at, it will assist our search if you indicate below those addresses

**Previous addresses:** **Date from:** (mm/yyyy) **Date to:** (mm/yyyy)

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

**Postcode:** Click or tap here to enter text.

### Section 4 – Proof of identity

**\* To help establish proof of your identity, your application must be accompanied by a copy of an official document. Types of acceptable official documents are, Identification Documents (ID Cards), Passports, Drivers Licence or a Health Card. The list of examples can vary depending on the applicant's nationality as they may possess other forms of official documents in their home country. Official documents should show your full name, date of birth, signature and current address.**

To help establish proof of your current address, your application must be accompanied by a copy of a recent utility bill or similar document, which must be in your name, listing your current address and must be dated within the last six months.

If you are not the registered householder or bill payer for your current address, then a signed letter from the registered householder(s) or bill payer(s) must accompany your application. The letter should confirm that you are a resident for the given current address. Furthermore, as part of the authentication process, the person writing the letter must also provide proof of identity in the same manner as per the above together with contact details.

Whilst it is acknowledged that ID Cards list a person's address, experience shows that some persons possess ID cards with outdated addresses listed on them. Therefore, the submission of an ID card as a form of proof for a current address, **will not be accepted.**

## Section 5 – Applicant Declaration & Signature

### 5.1 \* Declaration

I hereby authorise the Royal Gibraltar Police to supply the results of this vetting request to:

By signing this form I accept the terms and conditions.

|                   |  |              |             |
|-------------------|--|--------------|-------------|
| <b>Signature:</b> |  | <b>Date:</b> | Select date |
|-------------------|--|--------------|-------------|

\*\* You can sign this form physically with a pen or include a digital copy of your signature. This will then be matched to your signature on the proof of identity documents you have provided. If they do not match, your request may be rejected.

**Warning - a person who impersonates or attempts to impersonate another may be guilty of an offence.**

## Section 6 – Company / Non-Profit Organisation information

(to be completed by authorised signatory)

|                                                                                   |                                                                     |                                                                                      |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <b>6.1* Is your Company / Non-Profit Organisation registered with the RGP?</b>    | <input type="checkbox"/> Yes <input type="checkbox"/> No            | If No is checked, please download and complete the <a href="#">registration form</a> |
| <b>6.2* Name of Company / Non-Profit Organisation:</b>                            | Click or tap here to enter text.                                    |                                                                                      |
| <b>6.3* Position applicant is to be employed in:</b>                              | Click or tap here to enter text.                                    |                                                                                      |
| <b>6.4* Does the applicants job role fall under Schedule 12 of the CPEA 2011?</b> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                                                                      |
| Name of Authorised Signatory:                                                     | Click or tap here to enter text.                                    |                                                                                      |
| Signature of Authorised Signatory:                                                |                                                                     |                                                                                      |

## Privacy Notice

The contents of this document will be processed in strict compliance with the Royal Gibraltar Police's **Management of Police Information (MoPI) policy** which has been compiled in accordance with the provisions of the **Data Protection Act 2004 (DPA 2004)** and the **Gibraltar General Data Protection Regulations (Gib GDPR)**. The information provided within will be used to conduct searches of RGP systems to locate the information being requested.

Your details will be recorded within our vetting database for a period of 24 months from the date your application is processed. After this period, your application details, our response and any results sent to you will be deleted from our systems.

What to do next

You have now completed all the relevant sections of the form. Please check you have:

- Completed all the parts you need to (clearly and legibly) ☐
- Enclosed official forms of identification (as per Section 4) ☐
- Signed the form (Section 5) ☐

When you have completed the form, send it together with the required identity documentation to: [datarequests@royalgib.police.gi](mailto:datarequests@royalgib.police.gi)

FOR OFFICE USE ONLY

**Application**

**Date application received:**

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**OFFICIAL – PERSONAL (WHEN COMPLETE)**

|                                            |                                                          |
|--------------------------------------------|----------------------------------------------------------|
| <b>Identification document(s) checked:</b> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>Reference No.</b>                       |                                                          |
| <b>Date completed:</b>                     |                                                          |
| <b>Processed by:</b>                       |                                                          |
| <b>Receipt No.</b>                         |                                                          |

**Four Eyes Check**

|                                                                                                                                                                                                                                                                        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <i>In line with the RGP Standard Operating Procedure document on the "Four Eyes Principle", I can confirm that the data released in relation to this Vetting application has been checked against the data we hold on the data subject and is found to be correct.</i> |  |
| <b>Date Checked:</b>                                                                                                                                                                                                                                                   |  |
| <b>Police Staff name:</b>                                                                                                                                                                                                                                              |  |
| <b>Signature:</b>                                                                                                                                                                                                                                                      |  |

**OFFICIAL – PERSONAL (WHEN COMPLETE)**

The information supplied in connection with this application will be used for the purpose of administering this request and to ensure the accuracy of Police systems.