

DBS Update Service (England & Wales)

Name of Applicant: _____

DBS Certificate Number: _____

Date of Birth: _____

I give consent for _____ group to carry out a status check for updates on the information released on my DBS certificate.

Signature of Applicant: _____

Date: _____

To be completed by group representative.

I declare that I have seen the original DBS Certificate of the individual named above and completed an online update service check.

Signed (Group representative) _____

Name (Please Print) _____

Update service checks can be done via the website below:
<https://secure.crbonline.gov.uk/crsc/check?execution=e1s1>

Please keep this document with the completed ID Validation Form for the applicant named above in the group records for 3-6 months.