



## Guidelines for Electronic 'Existing PVG Scheme Member' Application

This is the form for applying for various PVG records, including the **Scheme Record Update**. **You should use this form only if you are already a member of the PVG Scheme**. If you are already a member of the Scheme for one type of regulated work (e.g. with children) and want to expand your membership to include the other type of regulated work (e.g. with protected adults), you should use this form to apply for a new 'Scheme Record'.

The PVG form **must** stay in the Word format. Forms should be returned to the Safeguarding Service as email attachments.

You should be aware of GDPR guidelines in relation to storage of personal information, particularly if using a shared computer or device.

### COMPLETION OF THE FORM:

#### Part 1: About you, the individual

- Enter date
- Choose application type:
  - **PVG Scheme Record** – for people who have already joined the PVG scheme but not for the groups they are now being checked for. Choose either Adult, Child, Both.
  - **PVG Scheme Record Update** – for people who have already been checked previously for the groups selected. Choose either Adult, Child, Both.

Please note that you can only be PVG checked for the groups you are being recruited for.

- Choose Title, or type in your Title.
- Enter current Surname and all Forename(s), including middle names and not just initials
- Enter Gender
- Enter Date of Birth in the format DD/MM/YYYY.
- Enter PVG Membership ID: This is the 16 digit number found on the left hand side or centre of your PVG certificate. It will begin with 11, 12, 13, 14, 15, 16, 17, 18, 19 or 20 depending on which year you joined the Scheme.
- Answer if there are changes to personal details (e.g. name/address), if Yes, provide these. The date of any change(s) **must** also be provided, e.g. new address – 12 Main Street, Edinburgh, EH2 3ES – resident from 01/01/2020.

#### Part 2: Your contact details

- Enter E-mail address, Home telephone, Mobile number.

#### Part 3: Regulatory Body Details

- Answer Yes or No. If Yes, select the Regulatory Body and Code from the drop down box as follows:

Regulatory Body Name	Regulatory Body Code
Care Commission*	101
General Chiropractic Council	102
General Dental Council	103
General Medical Council	104

General Optical Council	105
General Osteopathic Council	106
General Teaching Council for Scotland	107
Health Professions Council	108
Nursing and Midwifery Council	109
General Pharmaceutical Council	110
Scottish Social Services Council	111

\* Also known as The Scottish Commission for the Regulation of Care

- Type in your Registration Number(s).

#### **Part 4: Declaration on application**

- Type your name and enter the date.

#### **Part 5: Payment**

- Is the application for a voluntary role? Cross Yes or No. If Yes, no further action is required. If No, see below for payment.
- If the application is for a paid role, enter the Method of Payment and click on the payment portal to pay for the application and enter the 9-digit number in the relevant section. **Please ensure the correct payment is made for the correct type of application form, failure to do so may delay the application.** Payment can be made by either an applicant or the Safeguarding Coordinator.

If the application is to be paid for by the Church of Scotland, e.g. as a Ministries Candidate/Admissions post, leave the section blank. Ministries Locum Posts are required to be paid for by the applicant and the cost claimed back through expenses.

**Leave the rest of the form blank and e-mail it to [safeguarding@churchofscotland.org.uk](mailto:safeguarding@churchofscotland.org.uk) along with the Self Declaration form, cover sheet and criminal record checks if applicable under the terms of the Safeguarding Act 2018.**