

Risk Assessment

Missing references for historical appointments

Name:

Previous name (if any)

Date of Birth:

Employed since:

Number of references: 0 1

Date of last Enhanced DBS check:

Date of last Barred List check:

Date of last Disqualification by Association self-disclosure (if relevant):

Part-time: Full-time:

If part-time, does the person have other employment? Yes: No:

Have there ever been any complaints or concerns raised about this person's work with children? Yes: No:

What was the outcome?

Risk Assessment (see Risk Matrix) Low: <input type="checkbox"/> Moderate: <input type="checkbox"/> High: <input type="checkbox"/>
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Actions taken

Request reference from previous referee: Date

Request a reference from another current employer (p-t staff): Date

Request a new Enhanced DBS Check Date

Request a new Barred List Check Date

Review any previous concerns Date

Ensure copies of ID checks are on file Date

Other

Signed (Headteacher) Signed (Chair of Governors)

Date Date

Risk Assessment Matrix

	Least Risk	Moderate Risk	Highest Risk
No. of References	Two References	One Reference	No Reference
Employment	Full-time	-	Part-time
Date of Enhanced DBS	Within the last three years	Within the last five years	More than five years ago
Date of Barred List Check	Within the last three years	Within the last five years	More than five years ago
Date of Disclosure by Association (if relevant)	Within the last year	Within the last three years	More than three years ago
Changes of Name	None	One	More than one