**Misconduct declaration validation form**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| DELETE BEFORE SENDING  Please ensure all details on form completed  Please ensure *Declaration and Consent Form is attached to this form*  A new form is to be sent to each employer  Send as an editable document | | | | | | |
| Prospective employer: | | | | | | |
| Name of Current / Past employer (circle appropriate): | | | | | | |
| Identity of candidate | | | | | | |
| **Candidate Name** |  | | | **Employee ID at current/ past employer** | |  |
| **Previous name** |  | | | **Date of birth** | |  |
| **Current address** |  | | | **Previous address** | |  |
| **Registration number (if applicable)** |  | | | **Mobile phone number** | |  |
| Past Employment information | | | | | | |
| **Position title:** | | **Name of employer** | |  | | |
| **Commencement date** | |  | | |
| **Finish date** | |  | | |
| **Position title:** | | **Name of employer** | |  | | |
| **Commencement date** | |  | | |
| **Finish date** | |  | | |
| Questions | | | | | | |
| **Was the candidate terminated due to misconduct during employment?**  **Yes / No**  **Where the answer is yes, please provide further details and explain what the substantiated conduct was:** | | | | | | |
| **Has the candidate had any substantiated findings of misconduct in the last seven / ten (select either seven or ten and delete the other before sending) years?**  **Yes/No**  **Where the answer is yes, please provide further details. Explain what the substantiated conduct was and what disciplinary action was undertaken:** | | | | | | |
| **Is the candidate the subject of a current, open misconduct investigation? Yes / No**  **Did the candidate resign from their employment while the subject of a misconduct investigation?**  **Yes / No**  **Where the answer to either questions is yes, please provide further details, and explain the status of the investigation:** | | | | | | |
|  | | | | | | |
| Requested by (name) | | |  | | Date |  |
| Requested by (prospective employer) | | |  | | Date |  |