



## Sussex Neighbourhood Watch Co-ordinator/Street Contact Registration & Security Consent form

Neighbourhood Watch Co-ordinators/Street Contacts are volunteers in a position of authority and trust. Sussex Police and Neighbourhood Watch have a policy of checking all Co-ordinators/Street Contacts and deputies to verify their identity, and for any previous convictions or other circumstances that would make it inappropriate for them to hold such a position. Any information given will remain confidential. Not all previous convictions will mean automatic disqualification, but the final decision will rest with Sussex Police. You will need to submit a copy of your passport or driving licence, or other official documentation to establish your identity, along with this form.

Please complete in BLOCK	CAPITALS the details below.			
Title and full name:				
Previous surnames used (i	f applicable):			
Date of birth:	Place of	Place of birth:		
Home address:				
	Postcod	e:		
Home phone:	Mobile:	Mobile:		
E-mail address:				
Watch authority to place my Neighbourhood Watch purpo circumstances arise or info responsibility. I agree to rece	details on file, in compliance with oses only. I agree to comply with Da rmation become available that wo	Data Protect ta Protection ould be inco sex Police, Ac	I also give Sussex Police and Neighbourhood tion laws, and to use them for policing and laws, and to relinquish my position should nsistent with my holding this position of tion Fraud and Neighbourhood Watch, and scheme.	
Signed:	igned: Date:			
		nly		
Sign here if originals have	e been verified:			
For Sussex Police use onl	у			
PNC:	Niche/local information	Niche/local information:		
Checked by:	Checked at:		Date:	