**Parish Declaration**

Parish: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*name of incumbent or Area Dean if parish is in vacancy*) confirm that as of today, I have actively communicated PCR2 within this parish and have checked all records, including all archives and information held in our parish, I have also consulted with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PCC Secretary and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parish Safeguarding Officer, and I confirm that all known instances of concern of which we are aware and which relate to the behaviour of clergy and church officers towards children or adults, both historically and currently, have been reported to the Diocesan Safeguarding Team either prior to PCR2 or today. All of which are listed on Table 1A as below.

I also confirm that If it should happen that after the submission of this Declaration, any other relevant information regarding historical concerns comes to light, I will submit it to the DSA or PCR Administrator without delay.

Today I have submitted information on Table 1A which may be relevant to PCR2 **YES/NO** ***(please ensure you complete this section***) I confirm that I have checked all records within this Parish, including archives, full checks have been made on records dating back to ***\_\_\_\_\_\_\_\_ (insert year)***

I have completed Table 1A and attach it to this return ***(if there are no known cases please mark the table ‘no known historical or current cases’ and return).***

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Incumbent / Area Dean***

Print name­­­­­­­­­­: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***PSO***

Print name­­­­­­­­­­: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***PCC Secretary***

Print name­­­­­­­­­­: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**We would encourage you to complete your return electronically and email it to**: [PCR2@chester.anglican.org](mailto:PCR2@chester.anglican.org)

If you are unable to submit your return via email, you can send your completed table and declaration to: ***Suzanne Cottrell, PCR2 Independent Reviewer, Church House, 5500 Daresbury Park, Daresbury, Warrington WA4 4GE.* All declarations must be received by 28th February 2020, along with a completed Table 1A as below.**

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| --- | --- | --- | --- | --- |
| **Name and role of individual for whom you are submitting information** | **Safeguarding Concern** | **Date when referred to diocese.** | **Are you as a parish satisfied with the response DSA?** *(this should be yes of no, if no then there will be a follow up to parish made through PCR reference group)* | **Are you satisfied that there is no current risk?** *(This is yes or no,*  *if answer No the DSA will contact to offer advice and support)* |
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**Table 1A Parish Past Case Review Record for DSA *(please copy if you need additional boxes)***

Past Case Review Record for DSA for the parish of: ­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Incumbent: ­­­­­­­­­­­­­­­