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**Self-Disclosure Form**

**Confidential**

**Instructions:**
This form is designed to provide you with an opportunity to disclose any personal experiences related to domestic violence, either as a victim or perpetrator, or any other ways domestic violence has impacted your life. The information you provide will be treated with the utmost confidentiality and will only be used to assess support needs, safeguarding considerations, and suitability for the role.

Completing this form is voluntary, and disclosure will not automatically disqualify you from consideration. If you have any concerns, you may discuss them confidentially with a designated HR representative.

**Section 1: Personal Information**

**Full Name:**
**Date of Birth:**
**Position Applied For:**
**Contact Number:**

**Section 2: Self-Disclosure**

Please answer the following questions to the best of your ability.

1. Have you ever experienced domestic violence or abuse (as a victim, witness, or in any other capacity) that you feel is relevant to disclose in relation to this role?
	* ☐ Yes
	* ☐ No
	* If yes, you may provide details below (optional):
2. Have you ever been involved in domestic violence or abuse as a perpetrator, or been subject to any allegations, investigations, or legal proceedings related to domestic violence?
	* ☐ Yes
	* ☐ No
	* If yes, you may provide details below (optional):
3. Have there been any ways domestic violence has affected your life that you would like us to be aware of (e.g., impact on mental health, relationships, or work performance)?
	* ☐ Yes
	* ☐ No
	* If yes, you may provide details below (optional):
4. Do you require any support or workplace accommodations in relation to your experiences?
	* ☐ Yes
	* ☐ No
	* If yes, please specify:

**Section 3: Confidentiality & Consent**

I understand that the information provided in this form will be kept confidential and will only be used by the organization for safeguarding and support purposes. I acknowledge that disclosing any history related to domestic violence does not automatically impact my application but may be considered in relation to risk and suitability for certain roles.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For HR/Internal Use Only (To be completed by HR/Recruitment Team)**

**Reviewed by:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Date of Review:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Notes/Follow-Up Required (if any):**