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| **AF12 DISPUTE RESULT FORM *(To be e-mailed to:*** [***disputes@dbs.gsi.gov.uk***](mailto:disputes@dbs.gsi.gov.uk)***)*** | | | |
| **Disclosure Unit** |  | **Service Request No.** |  |
| **Applicant Name** |  | **CRM Reference No.** |  |

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| **1** | **PNC Record Dispute**  **where applicable to the Dispute, all fields are mandatory (otherwise not applicable)** | | **Yes/No** |
| **1.1** | **Do you accept all material aspects of the applicant’s dispute of their PNC information?** | |  |
| **1.2** | **Do you accept some of the material aspects of the applicant’s dispute of their PNC information?** | |  |
| **1.3** | **Do you reject all of the material aspects of the applicant’s dispute of their PNC information?** | |  |
| **1.4** | **Have you/will you remove, correct or revise the PNC record?**  **If answer is *‘No’,* and if your answer to 1.2 or 1.3 is *‘Yes’*, give reasons why at Section 4** | |  |
| **1.5** | **Were fingerprints required in order to resolve the dispute?** | |  |
| **1.6** | **Correct PNC ID Number (if applicable in this case).** |  | |
| **1.7** | **Name as held on Correct PNC ID (if applicable in this case):** |  | |
| **1.8** | **Date Of Birth recorded on Correct PNC record (if applicable in this case):** |  | |

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| **2** | **Approved Information Dispute**  **where applicable to the Dispute, all fields are mandatory (otherwise not applicable)** | **Yes/No** |
| **2.1** | **Has the Chief Officer decided that all of the Approved Information will be removed? (i.e. no Approved Information should be disclosed by this force)** |  |
| **2.2** | **Has the Chief Officer accepted all of the material aspects of the applicant’s dispute of Approved Information? (i.e. all of the changes requested by the applicant will be made)** |  |
| **2.3** | **Has the Chief Officer accepted some, but not all of the material aspects of the applicant’s dispute of Approved information? (i.e. some of the changes requested by the applicant will be made)**  **Please record a rationale for this decision, at Section 4 overleaf** [apply QAF MP7a and Chief Officer (AT3 Sect 4.2) considerations] |  |
| **2.4** | **Has the Chief Officer rejected all of the material aspects of the applicant’s dispute of Approved Information? (i.e. no changes will be made to the Approved Information at all)**  **Please record a rationale for this decision, at Section 4 overleaf** [apply QAF MP7a and Chief Officer (AT3 Sect 4.2) considerations] |  |

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| **3** | **In your opinion, do you categorise the changes as: Significant or Minor? (answer ‘Yes’ to one category only, please).** **Mandatory where changes are to be made, otherwise not applicable** | **Yes/No** |
| **3.1** | **Significant –** information removed or amended in such a way as to **materially change** the disclosure |  |
| **3.2** | **Minor –** information amended in such a way as to only **cosmetically change** the disclosure |  |

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| **3.3 Disclosure Unit Contact (mandatory)** | | | |
| **Name** |  | **Date** |  |
| **Position** |  | **Contact Number** |  |

**Please note:** Your rationale for not making changes to the disclosure as requested by the applicant (Section 4 of this template) will be supplied to the **Independent Monitor** (where Approved information is disputed) and **also to the applicant** to aid them in any subsequent challenge to your disclosure.

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| **4) Rationale for decision – apply QAF MP7a and Chief Officer (AT3 Sect 4.2) considerations. Mandatory** |
| *For any change or deletion that the applicant asked you to make to your original disclosure, and which you have not agreed to make, please provide your reasons. If the applicant provided specific points for you to use when considering, please record them here and record why they were not strong enough to make you change your mind.* |

**THE BELOW TABLE MUST BE COMPLETED IN FULL**

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| **Revised Approved Information text (mandatory where Approved Information disclosed by you has been amended following dispute – not required if the decision reached is ‘Do Not Disclose any information’)** | | | |
| **Applicant Name** |  | **CRM Reference No** |  |
| **Service Request No.** |  | **Date AT12 completed** |  |

After reviewing the Dispute of [*insert applicant name*] and the full original disclosed text, I have determined that revision is required.

In accordance with my responses at Page 1, I agree to disclosure of the following:

*[Enter the entire amended Approved Information disclosure text below, following the QAF Recommendation 6c template format. Please note – this should be the complete Approved text, including, where applicable, other incidents/records that were not disputed by the applicant.*

*This text, along with your responses at Page 1, will be used by the applicant to determine whether this case will be referred to the Independent Monitor]*

Date of Decision: ......../......../........