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**Police Certificate Form**

**F09**

New Mole House, Rosia Road, Gibraltar 🞟 Tel (+350) 200 72500 🞟 [www.police.gi](http://www.police.gi)

**Police Certificate Form**

The Police Certificate is for people who want to emigrate, travel, need a visa to live and/or work abroad, or are looking to obtain citizenship or residency in another country.

**General**

1. You will only be provided with your certificate if you have provided the following:
   * a completed application form
   * copies of your passport(s) / travel document(s)
   * Power of Attorney / legal documents (if applicable)
   * your application must be endorsed
2. The provisions of the Data Protection Act 2004 mean that in certain circumstances we will not provide some personal data. You will not be provided with personal data if:
   * releasing it to you would be likely to prejudice a criminal investigation
   * it identifies other individuals.
   * it is not relevant for your Police Certificate
3. The RGP will not accept responsibility for Police Certificates that are rejected by the relevant embassy, high commission or requesting authority of a country. It is your responsibility to check if a Police Certificate is acceptable for the country you require it for.
4. If you receive a Police Certificate that includes results of convictions, it is your choice if you proceed with your application to the embassy/high commission.

**Proof of Identity**

Section 3 asks you to give personal information about yourself which will help the Commissioner of Police to confirm your identity. He has a duty to ensure that information he holds is secure and he must be satisfied that you are who you say you are.

Section 4 asks you to provide evidence of your identity by producing copies of documents(s) with your application.

**Form Guidance**

This form can be completed digitally, and anyfields that are not applicable should be marked N/A. Original or scanned signatures are required throughout. If you are printing off this form and filling it in by hand, PLEASE USE BLOCK CAPITALS (clearly and legibly) using BLACK INK only, throughout the form to assist in processing your request.

Complete **Sections 1 – 11 overleaf.**

**Form Submission**

This form should be submitted to us electronically via [datarequests@royalgib.police.gi](mailto:datarequests@royalgib.police.gi) .

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| **Section 1 - Service Options** | |
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| **1.1 \* Total certificates required:**  (including any additional copies.) | Click or tap here to enter text. |

**\***=mandatory field

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| **Section 2 – Country you are travelling to** | |
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| **2.1 \* Country** | Choose an item. |
| **2.2 \* Other:** (specify) | Click or tap here to enter text. |

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| **Section 3 - Personal information** | | | | | |
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| **3.1 \* Title:** | Choose an item. (if other, please specify) Click or tap here to enter text. | | | | |
| **3.2 \* ALL forename(s)/given name(s):** | | | Click or tap here to enter text. | | |
| **3.3 \* Surname/Family name:** | | | Click or tap here to enter text. | | |
| **3.4 \* Have you ever used or been known by any other names?** | | | |  | Choose an item. |
| If you have answered Yes to the question above, please provide a list of all your previous names below, including **maiden/married** names, names prior to and after change by deed poll, and name at birth if different from the above. Failure to answer this question will delay your request. If you run out of space, please supply any additional information on a separate sheet.  **Previous/former name(s):** | | | | | |
| Click or tap here to enter text. | | | | | |
| Click or tap here to enter text. | | | | | |
| **3.5 \* Date of birth: (dd/mm/yyyy)** | | Click or tap to enter date. | | | |
| **3.6 \* Place of birth:** Village/town:  Country: | | Click or tap here to enter text.  Click or tap here to enter text. | | | |
| **3.7 \* Gender:** | | | Choose an item. | | |
| **3.8 \* Passport or Identity Card number:** | | | Click or tap here to enter text. | | |

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| **Section 4 – Passport / travel document details** | |
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| **4.1 \* Do you have a current passport or travel document?** | |
| Choose an item. | |
| If you have ticket ‘Passport’ or ‘Travel Document’ in the question above, please complete the section below. You must enter your details exactly as shown on your passport(s)/travel document. If you have more than two passports, please provide the details in the Additional Information section of the application. If you do not have a current passport or travel document, please complete question 4.16 below. **Please note that these details will appear on your certificate.** | |
| **Passport/travel document 1:** | |
| **4.2 \* Passport/travel document No.** | Click or tap here to enter text. |
| **4.3 \* Surname/family name:** | Click or tap here to enter text. |
| **4.4 \* Forename(s)/given name(s):** | Click or tap here to enter text. |
| **4.5 \* Date of birth:** | Click or tap here to enter text. |
| **4.6 Nationality:** | Click or tap here to enter text. |
| **4.7 Place of birth:** | Click or tap here to enter text. |
| **4.8 Expiry Date: (dd/mm/yyyy)** | Click or tap to enter your Expiry Date |
| **Passport/travel document 2 (if applicable):** | |
| **4.9 Passport/travel document No.** | Click or tap here to enter text. |
| **4.10 Surname/family name:** | Click or tap here to enter text. |
| **4.11 Forename(s)/given name(s):** | Click or tap here to enter text. |
| **4.12 Date of birth:** | Click or tap here to enter text. |
| **4.13 Nationality:** | Click or tap here to enter text. |
| **4.14 Place of birth:** | Click or tap here to enter text. |
| **4.15 Expiry Date: (dd/mm/yyyy)** | Click or tap to enter your Expiry Date |
| **4.16 Do you have any other official photographic identity document?**  e.g. national identity card / driving licence. | |
| Choose an item. | |
| If you have answered yes, please provide a copy with your application. If you have answered ‘No’ to the question above, please answer question 4.17 below. | |
| **4.17 If you do not have a current passport, travel document or any other official photographic identity document, please give the reason below.** | |
| Click or tap here to enter text. | |

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| **Section 5 – Applicant’s contact details** | |
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| **5.1 \* Daytime telephone No.**  (Please make sure that you include local/area or international dialling codes.) | Click or tap here to enter text. |
| **5.2 \* Evening telephone No.**  (Please make sure that you include local/area or international dialling codes.) | Click or tap here to enter text. |
| **5.3 \* Email address: (UPPER CASE)** | Click or tap here to enter text. |
| **5.4 \* Confirm email: (UPPER CASE)** | Click or tap here to enter text. |

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| **Section 6 – Address History** | |
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| **6.1 \* Current address: This is the physical address you live at.**  **Please note that this address will appear on your certificate** | |
| **Address line 1:**  **Address line 2:**  **Address line 3:**  **Address line 4:** | |
| **Postcode:** | Click or tap here to enter text. |
| **Date from: (mm/yyyy)** | Click or tap here to enter text. |
| **6.2 \* Previous addresses:** If you have lived at your current address for less than 10 years please give all your previous address(es) for this period below, including any temporary accommodation. If you have lived outside Gibraltar for over 10 years, please also provide your last Gibraltar address. If you run out of space, please use Additional Information page of this application form. | |
| **Previous address 1:** | **Date from:** (mm/yyyy)      **Date to:** (mm/yyyy) |
| **Address line 1:**  **Address line 2:**  **Address line 3:**  **Address line 4:** | |
| **Postcode:** | Click or tap here to enter text. |
| **Previous address 2:** | **Date from:** (mm/yyyy)       **Date to:** (mm/yyyy) |
| **Address line 1:**  **Address line 2:**  **Address line 3:**  **Address line 4:** | |
| **Postcode:** | Click or tap here to enter text. |
| **Previous address 3:** | **Date from:** (mm/yyyy)       **Date to:** (mm/yyyy) |
| **Address line 1:**  **Address line 2:**  **Address line 3:**  **Address line 4:** | |
| **Postcode:** | Click or tap here to enter text. |
| **Previous address 4:** | **Date from:** (mm/yyyy)       **Date to:** (mm/yyyy) |
| **Address line 1:**  **Address line 2:**  **Address line 3:**  **Address line 4:** | |
| **Postcode:** | Click or tap here to enter text. |
| **Previous address 5:** | **Date from:** (mm/yyyy)       **Date to:** (mm/yyyy) |
| **Address line 1:**  **Address line 2:**  **Address line 3:**  **Address line 4:** | |
| **Postcode:** | Click or tap here to enter text. |
| **Previous address 6:** | **Date from:** (mm/yyyy)       **Date to:** (mm/yyyy) |
| **Address line 1:**  **Address line 2:**  **Address line 3:**  **Address line 4:** | |
| **Postcode:** | Click or tap here to enter text. |

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| **Section 7 – Personal history** | | | | | | |
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| **7.1 \* Have you ever lived in Gibraltar?** | | | | | Click or tap here to enter text. | |
| **7.2 \* Have you ever lived anywhere away from Gibraltar?** | | | | | Click or tap here to enter text. | |
| **7.3 \* Are you a serving, ex-serving, dependant or ex-dependant, partner or ex-partner of a serving or ex-serving member of the UK armed forces. Are you a civilian that has been subject to UK armed forces acts?** | | | | | Click or tap here to enter text. | |
| **7.4 \* Are you the subject of any impending prosecutions or are you under investigation for a criminal offence?** | | | | | Click or tap here to enter text. | |
| If you have answered ‘Yes’ to question 7.4 please provide details below. If you run out of space, please use the Additional Information page of this application form. Please note that any information regarding impending prosecutions or criminal investigations held on police databases may show on your certificate. | | | | | | |
| **7.5 Alleged offence(s) 1:** | | | | | | |
| Click or tap here to enter text. | | | | | | |
| **7.6 Date of court hearing: (dd/mm/yyyy)** | | | | Click or tap to enter date. | | |
| **7.7 Court:** | | Click or tap here to enter text. | | | | |
| **7.8 Additional Information:** | | | | | | |
| Click or tap here to enter text. | | | | | | |
| **7.9 Alleged offence(s) 2:** | | | | | | |
| Click or tap here to enter text. | | | | | | |
| **7.10 Date of court hearing: (dd/mm/yyyy)** | | | Click or tap to enter date. | | | |
| **7.11 Court:** | Click or tap here to enter text. | | | | | |
| **7.12 Additional Information:** | | | | | | |
| Click or tap here to enter text. | | | | | | |
| **7.13 \* In Gibraltar or when serving in the UK armed forces in Gibraltar, have you ever:**   * **Been interviewed by police under caution;** * **Received a postal requisition or summons;** * **Been arrested, cautioned, warned or reprimanded;** * **Received a penalty notice; or** * **Been convicted of a criminal offence?** | | | | | | Choose an item. |
| **You must declare ALL convictions including those you believe to be spent under the Part 25 - Rehabilitation of Offenders, of the Criminal Procedure & Evidence Act 2011 (CPEA 2011).** | | | | | | |
| If you have answered ‘Yes’ to any of the above questions, please provide details below. If you run out of space, please use the Additional Information page of this application form. | | | | | | |
| **7.14 Offence(s) 1:** | | | | | | |
| Click or tap here to enter text. | | | | | | |

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| **7.15 Date of result/sentence/outcome:** (dd/mm/yyyy) | | Click or tap to enter date. |
| **7.16 Court:** | Click or tap here to enter text. | |
| **7.17 Result/sentence/outcome (e.g. caution/imprisonment/fine):** | | |
| Click or tap here to enter text. | | |
| **7.18 Offence(s) 2:** | | |
| Click or tap here to enter text. | | |
| **7.19 Date of result/sentence/outcome:** (dd/mm/yyyy) | | Click or tap to enter date. |
| **7.20 Court:** | Click or tap here to enter text. | |
| **7.21 Result/sentence/outcome (e.g. caution/imprisonment/fine):** | | |
| Click or tap here to enter text. | | |

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| **Section 8 – Third party nomination** |

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| The RGP will not discuss your application or disclose your details with anyone else. However, if you would like to nominate a third party to discuss this application on your behalf you must provide that person’s contact details below. Providing contact details for a third party will be considered as consent. If you are a Power of Attorney for the applicant, please enclose a copy of the Power of Attorney documents with this application. | |
| **8.1 Name of nominated third party:** | Click or tap here to enter text. |
| **8.2 Relationship to you:** | Click or tap here to enter text. |
| **8.3 Daytime telephone number:** | Click or tap here to enter text. |
| **8.4 Evening telephone number:** | Click or tap here to enter text. |
| **8.5 Email address:** (UPPER CASE) | Click or tap here to enter text. |
| **8.6 Confirm email:** (UPPER CASE) | Click or tap here to enter text. |

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| **Section 9 – Endorser details** |

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| Your application must be endorsed by a suitable individual that meets the following criteria:   * + Must have known you for a minimum of two years   + Must not be a partner or family member (no matter how distantly related)   + Must be aged 18 years or over   + Must be in one of the occupations or a similar occupation to those listed at the end of this application   This individual can be of any nationality and can reside anywhere in the world. This section does NOT require a signature.  **Please note:**  Your application will be delayed if you fail to provide this information.  **Your endorser may be contacted to verify the authenticity of your application. As part of this validation, we may need to send the photograph you submit to confirm that it is a true likeness of you.** | | | |
| **9.1\* Title:** | Click or tap here to enter text. Other:(specify) | | |
| **9.2 Surname/family name:** | | Click or tap here to enter text. | |
| **9.3\* Forename(s)/given name(s):** | | | Click or tap here to enter text. |
| **9.4\* Occupation:** | | | Click or tap here to enter text. |
| **9.5\* Relationship to applicant:** | | | Click or tap here to enter text. |
| **9.6\* Email address:**  (UPPER CASE) | | | Click or tap here to enter text. |
| **9.7\* Confirm email:**  (UPPER CASE) | | | Click or tap here to enter text. |
| **9.8 Daytime telephone number:** | | | Click or tap here to enter text. |
| **9.9 Evening telephone number:** | | | Click or tap here to enter text. |

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| **Section 10 – Additional information** |

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| Click or tap here to enter text. |

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| **Section 11 – Applicant Declaration & Signature** | | | |
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| **11.1 \* Declaration**  I hereby authorise the Royal Gibraltar Police to supply the results of this Police Certificate request to:  By signing this form I accept the terms and conditions. | | | |
| **Signature:** |  | **Date:** | Select date |
| \*\* You can sign this form physically with a pen or include a digital copy of your signature. This will then be matched to your signature on the proof of identity documents you have provided. If they do not match, your request may be rejected.  Warning - a person who impersonates or attempts to impersonate another may be guilty of an offence. | | | |

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| **Privacy Notice** |
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| The contents of this document will be processed in strict compliance with the Royal Gibraltar Police’s **Management of Police Information (MoPI) policy** which has been compiled in accordance with the provisions of the **Data Protection Act 2004 (DPA 2004)** and the **Gibraltar General Data Protection Regulations (Gib GDPR)**. The information provided within will be used to conduct searches of RGP systems to locate the information being requested.  Your details will be recorded within our database for a period of 24 months from the date your application is processed. After this period, your application details, our response and any results sent to you will be deleted from our systems. |

**What to do next**

You have now completed all the relevant sections of the form. Please check you have:

* Completed all the parts you need to (clearly and legibly)
* Enclosed official forms of identification (as per Section 4)
* Signed the form (Section 11)

When you have completed the form, send it together with the required identity documentation to:

[datarequests@royalgib.police.gi](mailto:datarequests@royalgib.police.gi)

**FOR OFFICE USE ONLY**

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| **Application** | | |
|  | | |
| **Date application received:** | |  |
| **Identification document(s) checked:** | | **Yes  No** |
| **Reference No.** | |  |
| **Date completed:** |  |  |
| **Processed by:** | |  |
| **Receipt No.** | |  |

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| **Four Eyes Check** |

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| *In line with the RGP Standard Operating Procedure document on the “Four Eyes Principle”, I can confirm that the data released in relation to this Vetting application has been checked against the data we hold on the data subject and is found to be correct.* | |
| **Date Checked:** |  |
| **Police Staff name:** |  |
| **Signature:** |  |

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| **Applicant checklist** (not applicable to online applications) | |
|  | |
| **This page does not need to be returned with your completed application and can be retained for your records.** | |
| Application form (fully completed). | Choose an item. |
| Signed **terms and conditions of service** | Choose an item. |
| **One** recent colour passport style photograph. | Choose an item. |
| Colour copies of passport(s) / travel document / other official photographic identity document. Colour copies of passport(s) / travel documents must clearly show your photograph, personal information, expiry date, nationality, machine readable zone, extension pages and signature (if applicable). Copies of other official photographic identity documents should show as many of these features as possible.  Black and white copies will not be accepted. | Choose an item. |
| Correct payment including optional postage costs if applicable | Choose an item. |
| Payment | |

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| **Application endorsement** |
| In order to satisfy RGP requirements, your application must be endorsed by an individual employed as one of the following or similar professions:   |  | | --- | | Accountant Optician | | Airline Pilot Personal Licence Holders (Liquor/Alcohol) | | Ambulance Service Official / Paramedic Personnel Officer  Architect Pharmacist | | Bank / Building Society Official Probation Officer | | Barrister Post Office Official | | Care Worker (Registered) Prison Officer | | Company Chairman Salvation Army Officer | | Chemist Social Worker | | Chiropodist Solicitor | | Civil Servant (Permanent) Surveyor | | Commissioner of Oaths Teacher | | Councillor (Local or County) Trade Union Officer | | Dentist Tutor  Director Valuer or Auctioneer | | Doctor Veterinarian | | Engineer Veterinary Nurse  Executive | | Financial Adviser | | Fire Service Official | | Funeral Director  Insurance Broker  IT Specialist | | Judge | | Justice of the Peace  Lawyer  Lecturer | | Legal Secretary | | Magistrate  Manager | | Medical Consultant/Specialist | | Member of a Chartered Institute | | Member of Parliament | | Merchant Navy Officer | | Minister of a Recognised Religion  Museum Curator | | Notary Public | | Nurse (SRN or other qualification) | | Officer of the Armed Services (Active or Retired) | |  | |  | |  | |  | |  | |  | |