APPLICATION FORM

- 1. This Application form when fully completed complies fully with BS7858:2012
- 2. Please answer ALL questions in **BLOCK CAPITALS** in your own handwriting using **BLACK INK**. If a question or section does not apply to you, insert 'N/A' or 'NO'
- 3. Your Security Screening cannot begin if you fail to fully complete this Application Form.
- 4. The information supplied in this Application Form is (Strictly Confidential).

DOCUMENTS SUPPLIED AND COPIED:

SIA LICENCE	
PASSPORT	
DRIVERS LICENCE plus COUNTERPART	
BIRTH CERTIFICATE / ADOPTION CERTIFICATE	H
CURRENT UTILITY BILL	
PERMIT TO WORK IN THE UK	
DETAILS OF CAUTIONS OR CRIMINAL CONVICTIONS	
DETAILS OF BANKRUPTCY (including satisfied):	
BANK DETAILS	
COPY OF NATIONAL INSURANCE NUMBER	

POSITION APPLIED FOR:	EMPLOYME	NT START DATE: (i	if known)
Title: Mr/Mrs/Ms/Other	First Nan	ne:	
Surname:			
Maiden / Former name (list all previous first name	es and surnames	or alias's):	
Current Address:			
Pos	st Code:		Y
Please state ALL previous addresses where you lif necessary.	have lived for the	e past six years, cont	tinue on a separate sheet
		Post Code:	to
		Post Code:	to
		. Post Code:	to
Home Tel No:			
Mobile No: Emai	l:	Da	ate of Birth:
Nationality:Place	e of Birth:	Ma	arit <mark>al</mark> Status:
National Insurance No:	. Passport No	Сор	oy attached: Y N N
Do you hold a current full/provisional* driving licence YES [] NO [] *(Delete as appropriate)			
Driving Licence Number:			
State any driving conviction in the past five years			
Do you hold a current SIA Licence: YES [] NO[1		
SIA Licence number:		Expiry date:	
Are you subject to Immigration Control? YES []	NO []	-01	
If YES, do you have an unrestricted entitlement to	take up employ	ment in the UK? YES	S[] NO[]

the Rehabilitation of Offenders Act)? YES [] NO []	
Are there any alleged offences outstanding against you'	? YES[] NO[]
Have you ever been made bankrupt or have any Court of the last 6 years? YES [] NO []	Judgements against you, whether satisfied or not, within
Has any order been made against you by a Civil or Milit	ary Court or Public Authority? YES [] NO []
If YES please give details:	
Is there anything in your personal circumstances that we	ould be detrimental to you working night shifts?
If YES please give details:	
Personal Reference	
	has known you well for at least two years, is still in contact person should have known you for at least two years and not address as yourself.
Name:	Name:
Address:	Address:
Post Code:	Post Code:
Tel No:	Tel No:
Occupation:	Occupation:
How long have you know referee:	How long have you know referee:

Have you ever been fined, cautioned, sentenced to imprisonment or placed on probation for a criminal act (subject to

EMPLOYMENT HISTORY

Starting with your last or present employer, give details of your employment history for the last 5 years, including details of full time education if it falls within that period. Include periods of self-employment and military service. For any periods of unemployment give the address of the DWP office to which you reported or the name of a person (not a relative) who can confirm your whereabouts.

Name and full address of current	Details	Unemployment / Employment dates
Employer or name of Job Centre/	Details	Offernployment / Employment dates
DWP Office Name:	Position held:	Month/Year
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Address	Reporting to:	From: /
Tel:	Reason for Leaving:	To: /
e-mail:		
e-mail.		
Name and full address of current Employer or name of Job Centre/	Details	Unemployment / Employment dates
DWP Office		
Name:	Position held:	Month/Year
Address	Reporting to:	From: /
	, ,	
Tel:	Reason for Leaving:	To: /
e-mail:	/ \	
Name and full address of current Employer or name of Job Centre/	Details	Unemployment / Employment dates
DWP Office		
Name:	Position held:	Month/Year
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.0.		
Address	Reporting to:	From: /
Tel:	Reason for Leaving:	To: /
e-mail:		

Name and full address of current Employer or name of Job Centre/ DWP Office	Details	Unemployment / Employment dates
Name:	Position held:	Month/Year
Address	Reporting to:	From: /
		UID
Tel:	Reason for Leaving:	To: /
e-mail:		
	5	
Name and full address of current Employer or name of Job Centre/	Details	Unemployment / Employment dates
DWP Office		
Name:	Position held:	Month/Year
Address	Reporting to:	From: /
7 tadiess	reporting to.	7
Tel:	Reason for Leaving:	To: /
e-mail:		
EMERGENCY CONTACT DETAILS:	1 1	
Name:		Name:
Address:		Address:
		
Relationship:		Relationship:
Work Tel no:		Work Tel no:
Home Tel no:	BVIC	Home Tel no:
Mobile Tel no:		Mobile Tel no:

DECLARATIONS

I certify that to the best of my knowledge, the information that I have given in my application for employment is true and complete and understand that any false statement or omission to the Company or its representatives may render lead to termination of employment without notice. I understand and agree that if so required I will make a Statutory Declaration in accordance with the provisions of the Statutory Declarations Act 1835 in confirmation of previous employment or unemployment. I authorise the Company or its agents to approach Government agencies, former employers, educational establishments, criminal justice agencies and personal referees for information relating to and verification of my employment/unemployment record. I consent to the

Company's reasonable processing of any personal information obtained for the purposes of establishing my medical condition and future fitness to perform my duties. I accept that I may be required to undergo a medical examination where requested by the Company. Subject to the Access to Medical Reports Act 1988, I consent to the results of such examinations to be given to the company and authorise the company to make a consumer information search with a credit reference agency, which will keep a record of that search and may share that information with other credit reference agencies. I further declare that any documents that I provide as proof of my identity, proof of address, proof of right to work and any other documents that I provide are genuine and give my consent for these documents to be examined under a UV scanner or similar device. I acknowledge that any falsified documents may be reported to the appropriate authority.

DATA PROTECTION ACT 1998

The Company will use the information you have given on your application form (together with any information which we obtain with your consent from third parties) for assessing your suitability for employment. It may be necessary to disclose your information to our agents and other service providers.

By returning this form to the Company you consent to our processing personal data about you where this is necessary, for example information about your credit status, ethnic origin or criminal offences. You also consent to the transfer of your information to your current and future potential employers where this is necessary (this may be to companies operating abroad if you apply for work outside of the United Kingdom).

Your information will be held on our computer database and/or in our paper filing systems. By signing below you agree to this process and confirm that you do not have a criminal record subject to the current Rehabilitation of Offenders Act and any amendments. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected.

DISCLOSURE

You are applying for a position of trust and in the event of being offered employment by the Company we apply for a Disclosure. However, having a criminal record does not necessarily bar you from employment. For more information ask a member of staff for a copy of the CRB Code of Practice/Disclosure Scotland and /or Company our policy statement regarding ex-offenders. Disclosure information is treated in a sensitive way and is restricted to those who need to see it to make a recruitment decision. By signing this document you allow the company to see a copy of the Disclosure. The Discloser information is not retained i.e it is disposed of within the timescales recommended in the CRB Code of Practice. By signing below you agree to this process.

SCREENING

Any offer of employment is subject to satisfactory screening, that the applicant consents to being screened and will provide information as required. That the information provided is correct and the applicant acknowledges that any false statements or omissions could lead to termination of employment.

IMPORTANT PLEASE NOTE:

Misrepresentation, or failure to disclose material facts, either during application or throughout employment may constitute grounds for withdrawal of an employment offer or termination of employment and/or legal action

Applicants name:	NI number:
Applicant Consent Signature:	Date: