**Personal Details**

|  |  |
| --- | --- |
| Title (Mr, Miss, etc) |  |
| First Name |  |
| Middle Name |  |
| Surname |  |

|  |  |
| --- | --- |
| First Line of Address |  |
| Second Line of Address |  |
| Town / City |  |
| County |  |
| Post Code |  |

|  |  |
| --- | --- |
| Mobile Number |  |
| Home Number |  |
| Work Number |  |
| Email Address |  |

|  |  |
| --- | --- |
| Nationality |  |
| Date of Birth |  |

|  |  |
| --- | --- |
| Next of Kin |  |
| Relationship |  |
| Contact Number |  |
| Address |  |
| Town / City |  |
| Post Code |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you hold a current full UK Driving Licence? | Yes |  | NO |  |

|  |  |
| --- | --- |
| Give details of any endorsements |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Do you have regular use of | Car |  | Motorcycle |  | Bike |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Are you a student | Yes |  | No |  | P38 form completed | Yes |  | No |  |

|  |  |
| --- | --- |
| Nationality (Required by the Employment Agencies Act) |  |

**To be completed by non-British and non-EC nationals only**

|  |  |
| --- | --- |
| Date of entry into the UK |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Do you have a UK work permit | Yes |  | No |  | If yes – Expiry date |  |

**Education & Qualifications**

(If CV provided, Please still complete in full)

|  |  |  |
| --- | --- | --- |
| Establishment attended | Course / Exam Completed | Qualification |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Employment History**

(If CV provided, may not be necessary to complete in full)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Employer | Position Held | To | From | Salary | Reason for Leaving |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Referees**

(Please give contact details of current and most recent employer. Students should give their lecturer or teacher. If this is not possible please give the names of the person best able to provide a reference on you. Friends and Family will not be accepted.

|  |  |
| --- | --- |
| Company Name |  |
| Name of Referee |  |
| Contact Number |  |
| Email Address |  |
| Address |  |
| Town / City |  |
| Job Title |  |
| Time Known |  |

|  |  |
| --- | --- |
| Company Name |  |
| Name of Referee |  |
| Contact Number |  |
| Email Address |  |
| Address |  |
| Town / City |  |
| Job Title |  |
| Time Known |  |

**Health & Safety, Relevant Certificates & Training**

(ie SMSTS, CSCS)

|  |  |  |
| --- | --- | --- |
| Certificate | Level | Expiry |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**PPE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have suitable PPE | Yes |  | No |  |

**48 Hour Waver**

The Working Time Regulations 1998 (‘the regulations’) require the company to limit your average weekly working time to 48 hours per week unless that you agree with the company that the hours do not apply to you.

The company wished to have an agreement with you. It proposes and agreement (which shall apply until terminated by notice) on the basis that:

1. The 48 hour limit on average weekly working time will not apply to you.
2. You may terminate the agreement (so that the 48 hour time limit would apply to you) by giving the person at the company who you usually report 3 months written notice.

Under the regulations the company must keep records relating to you working time. This is the case whether or not you reach an agreement with the company about waiving working time limits.

**If you accept the company’s proposal, please sign, date and print your name below. This document will then be a record between you and the company.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Signed** |  | **Print Name** |  | **Date** |  |

**Criminal Record & Security Checks**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have any unspent Criminal Convictions | Yes |  | No |  |

Please not that under the Rehabilitation of Offenders Act 1974 you do not have to disclose cautions and convictions that are spent.

|  |  |
| --- | --- |
| **If yes give details** |  |

**Data Protection**

**Use of Personal Information**

I fully consent to my agency using my personal information and data concerning myself in the legitimate pursuit of the company’ interests. This includes the supply of such information to third parties outside the company that are engaged in legitimate business activities with my agencies business. I also accept that if I wish to rescind this agreement I shall give the agency a minimum of three months’ notice.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Signed** |  | **Print Name** |  | **Date** |  |

**Identification**

**It is imperative that you return the following information with this Application Document fully completed and signed.**

* Copy of Passport (proof of eligibility)
* Driving Licence (both parts)
* National Insurance Proof (i.e. copy of NI card, old pay slip)
* Utility Bill, Bank Statement or Letter from HMRC (proof of address)
* Qualification Certificates
* Copy of CSCS, CPCS or Equivalent
* Updated CV

**Declaration**

**I declare that I have answered all the questions honestly and fully. I realise that any incomplete or false statement on my part will render me liable to my registration, application for a permanent position or temporary work being withdrawn. I agree that the information given on this form may be used for registered purposes under the data protection legislation.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Signed** |  | **Print Name** |  | **Date** |  |

**Please use this spare page for additional information.**