APPLICATION FORM

Contract Security Services Ltd
Challenger House, 125 Gunnersbury Lane, London W3 8LH



- 1. This <u>10-YEAR</u> Application Form, when fully completed, ensures compliance with British Standard 7858:2012 Security Screening of Individuals Employed in a Security Environment Code of Practice.
- 2. Please **answer ALL questions** in **BLOCK CAPITALS** in your **own handwriting** and **using BLACK INK.** If a question or section does not apply to you, insert 'NO' or 'N/A'.
- Your Security Screening cannot begin if you fail to fully complete this Application Form. Position applied Employment start date (if Known): Title: Mr / Mrs / Miss / Ms (please circle) Surname: Forenames: Surname at Birth:(if different from above) Date of Name Change: Telephone No.: Address: Mobile No.: Post Code: E-mail address: Place of Birth: Date of Birth: Nationality: National Insurance No.: Passport No.: Place of entry into the UK: (if applicable) Date of entry: (if applicable) Are you permitted to work in the UK? YES / NO Visa expiry date: (if applicable) YES / NO / N/A SIA Licence (if applicable, please circle) Type: No.: Expire Date: (if applicable) Person to contact in an emergency Name: Relationship: Address: Their work telephone No.: Their home telephone No.: Their Mobile telephone No.: Post Code: **EQUAL OPPORTUNITIES**

This section is voluntary and will NOT be used in assessing your application. We are an equal opportunities employer. If you choose to complete this section, **it will** help us to monitor the effectiveness of our Equal Opportunities Policy.

My ethnic origin is (please circle)

African, Asian, Caribbean, Caucasian, Other (please specify)

DRIVING LICENCE

Detail motoring convictions or endorsements in the last 5 years.

Number of points currently on your licence:

OFFENCES, CAUTIONS AND CONVICTIONS

If the answer to any of the above questions is **YES**, please give details:

Have the Police ever cautioned you?

Have you ever been convicted, fined or had any order made against you?

Are you aware of any Police investigation in which you may be involved?

YES / NO
YES / NO

NB. Disclosure is not required where there is a conviction to which the provisions of the Rehabilitation of Offenders Act 1974 applies. Failure to disclose an unspent conviction may result in summary dismissal. If you are unclear about any of these questions ask the interviewer.

FINANCIAL (BS 7858:2012 requires that we conduct a Consumer Information Check with a credit reference agency)

Have you ever been declared bankrupt or insolvent?

Are you the subject of any County Court Judgements or proceedings?

Are you the subject of any Financial Judgements in the Civil Court?

Are you the subject of any Individual Voluntary Arrangements (IVA's) with creditors from the previous 6 years?

YES / NO

If the answer to any of the above questions is YES, please give details:

CHARACTER REFEREES

How known:

Details of at least 2 people who are willing to act as Character Referees (not former employers or family / relatives or a person living at your address) who have known you for <u>at least 5 years</u>. Towards the end of the screening process we may approach your Character Referees to assist us in verifying your career/work history.

approach your character neierees to assist us in verifying you	i Career/work history.
Mr, Mrs, Miss, Other	Mr, Mrs, Miss, Other
Name:	Name:

Address: Address:

Post Code:

Tel No.:

E-mail address:

Years known:

Post Code:

Tel No.:

E-mail address:

Years known:

Mr, Mrs, Miss, Other Mr, Mrs, Miss, Other

Name: Name: Address: Address:

Post Code: Post Code:

Tel No.: Tel No.:

E-mail address:

Years known:

Years known:

How known: How known:

How known:

EDUCATION RECORD (Main Stream and/or College/U <u>years</u>)	Iniversity - only coi	mplete it applicat	ble within th	ie <u>last 10</u>
School Name:	Qualifications:		From	То
Address:			MM/YY	MM/YY
Post Code:				
Tel No.:				
College / University Name:	Course	Qualifications:	From	То
Address			MM/YY	MM/YY
Post Code:				
Tel No.:				
SERVICE RECORD (only complete if applicable within	n the <u>last 10 years</u>)			
ARMY / ROYAL NAVY / RAF / FIRE / POLICE circle)			From	То
OTHER specify)			MM/YY	MM/YY
Unit or Regiment: Service No.: Rank: Conduct Assess	ment on discharge:			
Are you a member of any reserve that will require annual train		S / NO		
If YES give details		-,		
SELF EMPLOYMENT / DIRECTOR REFERENCES (if a	pplicable)			
If you have been self-employed or a company director during t	· -	names of people w	vho can confi	m the
details.	•			
TRADE:	ACCOUNTANT:			
Name:	Name:			
Address:	Address:			
Post Code:	Post Code:			
Tel No.:	Tel No.:			
E-mail address:	E-mail address:			

EMPLOYMENT RECORD

- 1. State <u>all periods</u> of <u>employment, unemployment and self-employment</u> for the <u>last 10 years</u>
- 2. For any periods of <u>unemployment</u>, state the <u>address of the Unemployment Benefit Office</u> at which you reported and the type of benefit claimed, i.e. Job Seekers Allowance, Incapacity Benefit, etc.

START WITH YOUR PRESENT POSITION.

Employers Details	Employment	Employment Details	
(BLOCK CAPITALS)			
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		

Employers Details	Employment [Employment Details	
(BLOCK CAPITALS)			
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		
Name:	Position Held:	From	То
Address:	Staff No.:	MM/YY	MM/YY
	Reporting To:		
	Salary or Wage Per Week:		
Tel No.:	Reason for Leaving:		

DECLARATION

Please read this carefully before signing this application

I understand that employment with the Company is subject to satisfactory references and security screening in accordance

with BS 7858:2012.

I undertake to co-operate with the Company in providing any additional information required to meet these criteria.

I authorize the Company and/or its nominated agent, Nova Risk Management to approach previous employers, schools,

colleges, universities, character referees, Government Agencies or Professional Qualification Bodies (where appropriate) to

verify that the information I have provided is correct.

I authorize 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 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 understand that some of the information I have provided in this application will be held on a computer and some or all will be

held in manual records.

I consent to the Company's reasonable processing of any sensitive 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 Records Act 1988, I consent to the

results of such examinations to be given to the Company.

I hereby certify that, to the best of my knowledge, the details I have given in this application form are complete and correct.

I understand that any documents produced as evidence of identity and proof of residence may be examined using an Ultra

violet scanner or other methods to deter identify theft and fraud. Any suspect documents will be reported to the relevant

authority.

I understand that any false statement or omission to the Company or its representatives may render me liable to dismissal

without notice.

INTERVIEWEE SIGNATURE:

PRINT NAME:

DATE:

INTERVIEWER SIGNATURE:

DATE:

VACANCY:

COMMENTS:

PROOF OF IDENTITY AND ADDRESS OF RESIDENCE	
Please supply with this application form <u>COPIES</u> of either:	
One identity document from group 1 plus any two from Groups 1 or 2 At least one doc address and at least one document must show your date of birth.	ument must show your current
Or	
One identity document from group 2 (a) plus 2 further documents from group 2(a) or 2 show your current address and at least one document must show your date of bit	
Group 1 Documents:	Tick if enclosed
Signed valid Passport of any nationality. This is the preferred option as it will help us	s speed up the process.
• Signed UK photo driving licence (both parts of the full or provisional licence are required	d).
Valid and current Security Industry Authority (SIA) licence.	
UK original birth certificate issued within 12 months of birth.	
Biometric Residence Permit (UK)	
Group 2 (a) Documents:	Tick if enclosed
 UK birth certificate (UK + CI issued more than 12 months after date of birth). 	
Adoption Certificate (UK + CI)	
HM Forces ID Card (UK).	
Valid firearms licence with photo (UK + CI)	
Non-UK Photo Driving Licence (valid for 12 months after entry date to UK)	
Current UK driving licence (old style paper version).	
Marriage/Civil Partnership Certificate (UK + CI).	
Group 2(b) Documents:	Tick if enclosed
• Financial statement (UK) e.g. pension, endowment, ISA –issued in last 12 months	
Benefit Statement e.g. Child Allowance, Pension – issued in last 3 months	
 P45/P60 statement (UK + CI) issued in the last 12 months. 	
EU National ID Card	
Bank or building society statement issued to your current address, less than three mont	ths old. (UK + CI or EEA)
Mortgage statement (UK or EEA) issued in the last 12 months.	
 Utility bill (gas, electric, telephone, water, satellite, cable- <u>not</u> mobile phone) issued to you last three months. You can only use one utility bill. 	our current address within the
Bank / Building Society Account Opening Confirmation Letter (UK)	
British work permit /visa (UK Residence Permit – valid to expiry date) issued in last 12 m	nonths.
 Letter from H.M. Revenue & Customs, Department of Work and Pensions, employment issued within the last three months. 	service, or local authority
A credit card statement (UK or EEA) sent to your current address within the last three me	onths.
Council Tax statement issued in the last 12 months.	
 Cards carrying the PASS accreditation logo (UK + CI) 	