



Affiliated

APPLICATION FOR A SCAFFOLDING CARD

Please note your application will take up to 12 working days to process from the date we receive it, see notes on page 2 of application for further guidance on the application process



SECTION A - You, the applicant, must fill in this section. Fill any blank areas and tick the correct boxes.

A1 Your details:

Title

Surname

Forename

Home Address

Postcode

E-mail address:

PHOTO

You must attach a passport style photograph if you have not passed the CITB Health, safety and environment test within the last 2 years

Registration No.

National Insurance No.

Telephone Number

Date of Birth - -

DD MM YYYY

Type of application being made: New Card Duplicate Renewal

A2 Send my card to: my home address The company address in section C a different address, which is:

Postcode

A3 I confirm to the best of my knowledge the information above is correct and I agree to comply with the CISRS criteria as laid out in the CISRS Scheme Booklet. I understand and agree that the information on this form will be used by CITB and CISRS for the purposes of administering the CISRS Scheme, this may include passing on information to Employers or Training Providers and for this purpose, your data and image (photo) may be entered onto a secure database accessible via a website.

Please note that all application fees are non-refundable. If your application is incomplete you will be given 180 days to resolve any issues. Any applications returned after 180 days will be subject to an additional £26.50 non-refundable application fee.

We may contact you by mail, telephone or e-mail to let you know about other goods or services or promotions which may be of interest to you. Please tick this box if you wish to receive such information from us.

Applicant Signature Date: - -

DD MM YYYY Please send VAT receipt

SECTION B - Scaffolding Courses completed - you, the applicant, employer or sponsor may complete this section

Course Type	Please tick	Training Centre Name	Course Type	Please tick	Training Centre Name
Part 1	<input type="checkbox"/>	<input type="text"/>	Advanced	<input type="checkbox"/>	<input type="text"/>
Part 2	<input type="checkbox"/>	<input type="text"/>	NVQ/SVQ Level 3	<input type="checkbox"/>	<input type="text"/>
NVQ/SVQ Level 2	<input type="checkbox"/>	<input type="text"/>	CISRS 2-Day Skills Test	<input type="checkbox"/>	<input type="text"/>
CISRS 1-Day Skills Test	<input type="checkbox"/>	<input type="text"/>	Supervisor	<input type="checkbox"/>	<input type="text"/>
EWPA Skills Test	<input type="checkbox"/>	<input type="text"/>	5-Day BASE	<input type="checkbox"/>	<input type="text"/>

If you have previously carried out CISRS approved training via another route of entry please contact the CISRS Heldesk to confirm the eligibility to apply for a CISRS card before submitting an application.

Other:

Copies of training certificates must be attached, failure to do so will result in your form being returned. A copy of your Health, safety and environment test or exemption is required with the application, for a full list of Health and Safety requirements see page 2.

Card Type: (Please tick) Scaffolder Advanced Supervisor BASE

SECTION C - Employer Declaration - a current or previous employer must complete this section

By completing and signing the declaration below, I certify that:

- The details on this form are correct to the best of my knowledge and that the photograph (if supplied) is a true likeness of the applicant.
- I have read the information on Health and Safety and confirm that the applicant has either passed the CITB Health, safety and environment test within the last 2 years or meets the exemption requirements (**you must attach a copy of certificate**).

PLEASE ENSURE THIS BOX IS FULLY COMPLETED (The applicant cannot complete this section)

Employer name:

Address:

Postcode

Date

Signature:

Print name:

Telephone number:

Authorisation code
(See reverse of form for use)

CHECKLIST BEFORE RETURNING THIS APPLICATION

SECTION A - APPLICANT'S DETAILS

Please complete all parts of this section.

MAILING ADDRESS - All correspondence relating to this Records Scheme will be sent to the Home Address specified in Section A unless an alternative address is entered in Section A2. If an alternative address is entered correspondence will be sent as follows:

Notification of Registration - Individual's Home Address

Scaffolding Record Card - Mailing Address specified in Section A2.

SECTION B - TRAINING COMPLETED

This section must provide details of courses undertaken and training certificates for these courses must be attached to the form for New and Endorsement applications or the form will be returned. For first time Scaffolder and Advanced Scaffolder applications it is a mandatory requirement for an NVQ/SVQ and CISRS Skills Test to have been completed; NVQ/SVQ Level 2 and CISRS 1-Day Skills Test for a Scaffolding Card and NVQ/SVQ Level 3 and 2-Day Skills Test for Advanced Card. Failure to complete the NVQ/SVQ will result in your form being returned. NOTE: CISRS do not issue a card solely upon the completion of the NVQ/SVQ in Accessing Operations and Rigging and applicants must have completed all other requisite training.

For renewals the applicant will be issued a card showing the same categories recorded on the Record Scheme database unless evidence of further training meeting scheme criteria is attached to this application form.

SECTION C - EMPLOYER/SPONSOR DECLARATION

This section must be completed as follows:

New applications - must be completed by an employer (if self employed this may be completed by a sub-contractor) or training provider who can verify the likeness of the photo, the competence of the applicant and that the training has been completed.

Renewal applications - must be completed by an employer (if self employed this may be completed by a sub-contractor).

Duplicate card application - must be completed by someone who can verify that the photograph is a true likeness of the applicant.

Failure to complete Section C will result in the form being returned.

HEALTH AND SAFETY

The following are all deemed as acceptable alternatives to passing the CITB Health, safety and environment test (**A COPY OF THE CERTIFICATE MUST BE ATTACHED TO THIS APPLICATION**):

- Current CCNSG Safety Passport (SCATS Card)
- NEBOSH Construction Certificates (Taken within 2 years of application)
- Current Offshore Survival Certificates (OPITO Approved)
- SSSTS or SMSTS (Taken within 2 years of application)
- FAS/SOLAS Safe Pass
- IOSH Working Safely/IOSH Managing Safely/IOSH Directing Safely (Taken within 2 years of application)

Please note that for CISRS Supervisors cards only the CITB Supervisor Health, safety and environment test, CCNSG Leading a Team Safely, SSSTS, SMSTS, NEBOSH, IOSH Managing/Directing Safely are acceptable.

BEFORE POSTING PLEASE CHECK THE APPLICATION AND ENSURE THE FOLLOWING ARE ENCLOSED:

POST TO:	CISRS PO BOX 1055 Bircham Newton King's Lynn Norfolk PE31 6XQ	CHECKLIST:	Please tick
		BASE	<input type="checkbox"/> • 5-day BASE Certificate
		Scaffolder	<input type="checkbox"/> • Part 1 and Part 2 unless Assessed Route Certificate held • NVQ/SVQ Level 2 • CISRS 1-Day Skills Test Certificate or EWPA Assessment
		Advanced	<input type="checkbox"/> • Part 1 and Part 2 and Advanced Certificate unless Advanced Assessed Route Certificate held • NVQ/SVQ Level 3 • CISRS 2-Day Skills Test Certificate
		Supervisor	<input type="checkbox"/> • Supervisors Certificate
		All cards	<input type="checkbox"/> If using an exemption to the Health, safety and environment test a Glossy Passport sized photograph must be attached with glue to the Box in Section A. Please do not use staples. <input type="checkbox"/> Payment - please attach a Cheque or Postal Order for £26.50 (includes VAT) made payable to CITB - DO NOT SEND CASH . Or, if you hold an account with CITB, please attach an official Purchase Order requesting an invoice.

If you have pre-paid for your application form enter the authorisation code you were given (see box along bottom right hand side on the front of this form).

Please note that all application fees are non-refundable. If your application is incomplete you will be given 180 days to resolve any issues. Any applications returned after 180 days will be subject to an additional £26.50 non-refundable application fee.

If you have any queries of a general nature or require assistance in completing this application please call the CISRS Helpline on **0844 815 7223** or for further information on the CISRS Scheme rules visit www.cisrs.org.uk