



Please answer all questions using **BLOCK CAPITALS**. If any entry is inapplicable insert "**NO**" or "**N/A**" Please Tick ($\sqrt{}$) appropriate boxes: A Complete 5 Year History Is Required by BS 7858:2012

PERS	ONAL											
Mr:	Mrs:	Miss:	Ms:	Surname:				Forenan	nes:			
Previou	s Surname (in	cluding Ma	niden Name)	:					Please bring wedding certificate to intervio			
Address	s:											
								Postcod	e:	How long	g at address:	
Telepho	ne Number:						Mobile Numbe	er:				
Place of birth:					Nationality:							
Date & p	place of entry:								Work	Permit?		
Marit	al Status	Marrie	ed: S	ingle:	Divorced:	Separated:	Widowed:					
	& Addre											
							Relationship:		Telephone Number	er:		
BACK	GROUNI) INFO	RMATIC	ON:								
Natio	nal Insura	ance N	umber:									
Do yo	u hold a	full UK	Car dri	ving lic		Yes: No:	Licens	se Number	:			
Do yo	u have y	our ow	ın trans		/es: No:		you have	any motor	ing offences	Yes:	No:	
f so p	olease giv	ve deta	nils:									
									Please con	tinue on sepa	rate sheet if	necessary
SECU	RITY TRA	AIN-										
SIA ap	oproved t	training	yes:	No:	Cert	. No:						
Where	e trained:											
Do yo	u hold a	First A	id Certi	ficate u	nder the	Health & Sa	afety at Wo		es: No:			

PHYSICAL										
Male: Female:	Weight:		Height: Ha		Hair Co	air Colour:		Eye Colour:		
Have you got norn	nal vision in	both eyes w	vithout glasses:	Yes:	No:	With G	ilasses:	Yes:	No:	
Have you got norn	nal sense of	f smell:	No:							-
Name & Address of	of GP:									
				Yes:	No:					
May we request in	formation fi	rom him/her	if necessary							
EDUCATION:								Please bi	ring certifica	ates to interview
Name of school/Co	ollege etc.	Address		Fron	n	То	Exam	inatio	ns Pass	sed
Are you a student	at present:	Yes: No:								
SERVICE										
Did you serve in:	Royal Navy:	Army:	R.A.F. Po	olice:	Fire	e Service:	Merchant Na	vy:		
Dates Served:	From:	То:	Rank Attaine	d:			Conduct Rat	ting:		
Reason for leaving	j:				Are y	ou liable fo	or recall:	Yes:	No:	
Are you a member	of any RES	SERVE involv	/ing Annual Tra	ining:	Yes:	No:				
CRIMINAL										
Have you ever bee					Yes	No:	If so	olease	give de	etails below
Have you ever bee outstanding court			d do you have a	any	Yes	S: No:	If so p	please	give de	etails below
Date	Offence (i	ndicate Conv	viction/Caution/	/Pendi	ng/Ban	krupt/Debi	t) Sente	ence		
							Please cor	ntinue on s	separate she	eet if necessary.

Have you ever been declared bankrupt and do you have any outstanding court judgements for debt?

Yes:	No:

PERSONAL REFERENCES

Please give the names, addresses and occupations of two persons who have known you for 10 years and who are not related to you to whom reference may be made:

Name:		Name:				
Address:		Address:				
Postcode:	Telephone N	lumber:	Postcode:	Telephone N	lumber:	
Occupation:	1	How long known:	Occupation:		How long known:	
		<u> </u>				

BUSINESS REFERENCES

If you have been self employed, give the names and addresses of two persons, not relatives or referees above, who can confirm this (e.g. Accountant, Solicitor, Customer Companies with whom traded).

Name:			Name:				
Address:			Address:				
Postcode:	Telephone N	lumber:	Postcode:	Telephone N	lumber:		
Occupation:		How long known:	Occupation:		How long known:		

EMPLOYMENT RECORD

(Your application will not be considered if this section is not fully completed)

Please show ALL periods of employment and unemployment covering the last FIVE YEARS give reasons for gaps between employment periods. (Please show current/most recent employment first)

	Name & Address of Employer or			Office use only				
Dates	Unemployment Office (including Postcode)	Telephone No. & Contact	Job title& reason for leaving	Date / Contact	From / To	init		
From:			Job:					
То:			Reason:					
	Postcode:							

Name & Address of Employer or Unemployment Office

Office use only

Dates	Unemployment Office (including Postcode)	Telephone No. & Contact	Job title& reason for leaving	Date / Contact	From / To	init
From:			Job:			
То:			Reason:			
	Postcode:					
From:			Job:			
То:			Reason:			
	Postcode:					
From:			Job:			
То:			Reason:			
	Postcode:					
From:			Job:			
То:			Reason:			
	Postcode:					
From:			Job:			
То:			Reason:			
	Postcode:					

WORKING TIME DIRECTIVE:

This agreement is made between Primary Security and:

Name:	Payroll Number:

The Working Time regulations 1998 provide that the average working week, including overtime shall not exceed 48 Hours.

I only agree to work the expected shift pattern of an average of 56 hours (fifty-six hours) over a seven day shift pattern averaged over seventeen weeks. Any additional hours of work required to the above are to be considered as EXTRA working hours and are to be agreed by the employee. Other than the above, all my statutory rights as an employee remain in place. The company and the employee agree that this limit (48 hours) shall not apply to the employee. This agreement will remain in force indefinitely. The employee or the company may terminate this agreement at any time by giving not less than 1 month's written notice to the other.

Signed:	Date:	Employee:

DECLARATION

I understand that my employment is subject to satisfactory vetting and references in accordance with BS 7858:2012. I also declare that any documents that I provide as proof of my identity proof of address, proof of the right to work and any other documents are genuine and I give my consent for those documents to be examined under a UV scanner or similar device. I acknowledge that any falsified documents may be reported to the appropriate authority.

I undertake to co-operate with Primary Security Ltd in providing additional information required to meet these criteria I authorise Primary Security Ltd and/or its nominated agent to approach previous employers, schools/colleges, character references or government agencies to verify that the information I have provided is correct.

I authorise Primary Security Ltd 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.

Data Protection

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 will also consent to the transfer of your information to your current or future employers where this is necessary.(this may be to companies operating abroad if you apply for work outside the UK)

Your information will be held on our computer database or in a paper filing system. By signing below you agree to this process and confirm that you don't have a criminal record subject to the current rehabilitation of offenders act and any amendments.

Disclosure

You are applying for a position of trust and in the event of being offered employment by the company we may apply for disclosure. However, having a criminal record does not necessarily bar you from employment. Disclosure 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 disclosure information is not retained it is disposed of within time scales recommended in the CRB codes of practise.

I consent to the Company's reasonable processing of any sensitive personal information obtained for the purposes required 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 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 hereby declare that the information I have provided is current and truthful and that any false statements on this Application Form shall be considered cause for dismissal. 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 hereby certify that I have completed this Application Form myself and that I have read and understood and agree to abide by the above declaration.

Applicant Signature:	Date:		
		Yes:	No:
May we approach your present employer for references i			