

APPLICATION FOR EMPLOYMENT

THIS FORM MUST BE COMPLETED FULLY IN EITHER BLUE OR BLACK INK. CVs WILL NOT BE ACCEPTED

Please answer the questions in this form as fully as possible. Applications are welcome from all people with relevant or potential skills, abilities and attitude to do the role. Reasonable adjustments may be made to enable individuals with disabilities to perform the role. Senator Security Services recruits and selects on suitability and each case will be assessed upon its own merits.

The information given on the Equal Opportunities moni-

toring form, which contains personal and monitoring information, will be separated from the main application form and will not form part of the selection process. All information will be held in the strictest confidence.

If you wish to provide any additional information please continue on a separate sheet. This sheet should include your name, and the section to which the information is related to.

Post applied for

Location

PERSONAL INFORMATION

Name

National Insurance Number

Previously Used Names

Recommended by/ Where advert seen?

Address

Postcode

Telephone

Mobile

Work Email

Personal Email

TRANSPORT (PLEASE TICK RELEVANT BOXES)

Do you have your own transport for work purposes YES NO

Which Driving Licence do you hold? FULL CAR MOTORBIKE PROVISIONAL INTERNATIONAL NONE

Is your licence free from motoring convictions? YES NO

If NO please confirm current convictions

UNIFORM SIZES

Chest

Waist

Inside Leg

Collar

Height

Shoe

RIGHT TO WORK

If not born in the UK, state date and place of entry

Date

Place

Do you have a work permit? YES NO

Expiry Date

Do you have a Visa Student entry? YES NO

Expiry Date

REHABILITATION OF OFFENDERS ACT 1974

You will appreciate that all companies in the security industry must refuse employment to applicants who have unspent convictions. This means convictions not classed as "spent" under the provisions of The Rehabilitation of Offenders Act 1974.

The purpose of the Rehabilitation of Offenders Act 1974 is to give convicted persons a chance to "live down" their convictions. If you have a conviction, it means that after a certain time has passed since the conviction it becomes "spent" and you are entitled to ignore it when filling in your application form and

answering questions asked by any of our staff.

If you have a criminal conviction, imposed by either a Civilian or Military Court, it is your responsibility to find out whether it is "spent" or "unspent".

Should you be in doubt about whether or not the conviction(s) is/are spent, make sure of your position by contacting a Citizen Advice Bureau, a Community Law Centre or the Clerk of the Court where you were last sentenced.

Failure to disclose an unspent conviction is in itself a criminal offence.

DECLARATION

Please confirm details of convictions, or if you have no cautions/convictions write NONE below.

BS7858 INFORMATION: PERSONAL REFERENCES

Please provide details of 2 referees who have known you for at least 2 years in the preceding 5 years and who are not related to you, not living at the same address and not your current or former employer. These references may assist with confirming your employment history

Name

Address

Contact Tel No.

Email

How long known

Relationship

Name

Address

Contact Tel No.

Email

How long known

Relationship

BS7858 INFORMATION: SERVICE INFORMATION

Please confirm your Service ROYAL NAVY ARMY RAF POLICE TA

Please confirm dates served

From	To
Service No. <input style="width: 90%;" type="text"/>	Unit/Regiment <input style="width: 90%;" type="text"/>
Rank Attained <input style="width: 90%;" type="text"/>	Conduct Record <input style="width: 90%;" type="text"/>

BS7858 INFORMATION: SELF EMPLOYMENT

If you have been self employed in the preceding 10 years please provide details of 2 Trade References *i.e. Companies you have traded with or your Accountant or Solicitor.*

Name

Address

Contact Tel No.

Name

Address

Contact Tel No.

BS7858 INFORMATION: EDUCATION AND EMPLOYMENT HISTORY

Please give details of all **employment, self employment, and registered or unregistered unemployment** back to school for the 5 years preceding the date of this application

Name/address of
School / College / University

on a month to month basis.

Please use a continuation sheet if necessary, ensuring the continuation sheet is in the same format.

Dates
From To

Company name with full address
and phone number (current/most
recent employer first)

Dates
From To

Reason for
leaving

Company name with full address and phone number (current/most recent employer first)	Dates From To	Reason for leaving

TRAINING

Have you had SITO training? YES NO

Have you had Conflict Resolution training? YES NO

Have you had CCTV training? YES NO Other

Do you hold a First Aid certificate? YES NO If so, expiry date

It is a mandatory requirement that all security personnel must possess a Security Guarding or Door Supervision Licence through SIA. Do you hold a current SIA Licence? If so which licence?

Security Guarding Door Supervision CCTV Other

Licence Number

Expiry date

Are you currently waiting Licence processing? If so please provide your Unique Reference Number (URN) and date applied.

URN

Date

APPLICATION FORM DECLARATION

Please read this carefully before signing this application form

- I understand that employment with the Company is subject to satisfactory references and security screening in accordance with BS7858.
- I undertake to co-operate with the Company in providing any additional information required to meet these criteria.
- I authorise the Company and/or its nominated agent to approach previous employers, school/ colleges, character referees or Government Agencies to verify the information I have provided is correct.
- I 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 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 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 understand and agree that if so required I will make a Statutory Declaration in accordance with the provisions of the Statutory Declarations Act 1853, in confirmation of previous employment or unemployment.
- 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 false statement or omission to the Company or its representatives may render me liable to dismissal without notice.

Signature

Print Name

Date

HEAD OFFICE USE ONLY

Invite for interview? YES NO If NO, reason

INTERVIEW DETAILS

Date Time.....

Location Conducted by

INTERVIEW NOTES

.....
.....
.....
.....

Successful at interview? YES NO If NO, reason.....

Period of notice to be worked	Holidays booked.....
Birth Certificate seen YES <input type="checkbox"/> NO <input type="checkbox"/>	Driving Licence seen YES <input type="checkbox"/> NO <input type="checkbox"/>
Passport seen YES <input type="checkbox"/> NO <input type="checkbox"/>	Work Permit seen and confirmed YES <input type="checkbox"/> NO <input type="checkbox"/>
SIA Licence seen YES <input type="checkbox"/> NO <input type="checkbox"/>	Service Record seen and confirmed YES <input type="checkbox"/> NO <input type="checkbox"/>
First Aid Certificate seen YES <input type="checkbox"/> NO <input type="checkbox"/>	