# RESPONSE UK SECURITY LIMITED

Address: Suit 7, Howbury House Thames Road Crayford Dartford DA1 4RQ,United Kingdom Telephone: + 01322553105 - 02082262177 - 08455190249 | Fax: + 44 01322526714 Email: info@responseuksecurity.co.uk | Website: www.responseuksecurity.co.uk

_		
1 1	$\sim$	
11	+a	ı

Please	complete	the	application	form	and	attach	the	following.

- 1. Copy of Passport Including Visa Page
- 2. Copy of SIA Badge
- 3. 2 Photograph
- 4. Proof of Address
- 5. Copy of Academic Record
- 6. DVLA [copy if any]
- 7. Copy of NI Card

Thanks

Manager

# RESPONSE UK SECURITY LIMITED

Address: Suit 7, Howbury House Thames Road Crayford Dartford DA1 4RQ,United Kingdom Telephone: + 01322553105 - 02082262177 - 08455190249 | Fax: + 44 01322526714 Email: info@responseuksecurity.co.uk | Website: www.responseuksecurity.co.uk

## **Employment Application**

Please affix photo

Candidate Name :	
Address :	
Telephone Contacts :	
National Insurance No :	
S.I.A. licence Number :	Expires on :/

Providing false information with the aim of securing employment could lead to charges of obtaining pecuniary reward by deception Theft Act 1968 - section 16.

## PLEASE COMPLETE ALL SECTIONS IN CAPITAL LETTERS

Person	al Details
Mr/Mrs/Miss/Ms(Or other title)	Surname
Forenames	
Previous Surname (Changed by marriage, deed poll etc.)	
Date Name changed and reason / /	
Present Address	
	Postcode
Previous Address if less than 3 years Address.	
	Postcode
Home Phone No	Work Phone No
Mobile Phone No	E-mail Address
Age Date of Birth / Birth Place	Nationality
Are you subject to Immigration control YES / NO	
If yes do you have unrestricted entitlement to take up emp	plovment within the UK YES / NO
Do you have student visa YES / NO	<b>,</b>
Date of entry (or re-entry) into the UK / /	
Height Color	ur of Eyes Colour of Hair
Distinguishing marks or scars	
Nat. Ins. No Marital Status	Married / Single / Divorced / Separated
Next of Kin Re	elationship
Contact Numbers	
Number of Dependants Ages	
Do you own a car/motor cycle? Make	Model Registration No
Do you hold a current full UK driving licence? YES / NO	Number
Date of Issue Give details of endo	prsements below:

## PLEASE COMPLETE ALL SECTIONS IN CAPITAL LETTERS

Partner/Wife/Husband Details			
Mr/Mrs/Miss/Ms(Or other title)	Surname		
Forenames			
Previous Surname (Changed by marriage, deed poll etc.)			
Date Name changed and reason / /			
Present Address			
	Postcode		
	Postcode		
Home Phone No	Work Phone No		
Mobile Phone No	E-mail Address		
Age Date of Birth / Birth Place	Nationality		
Are you subject to Immigration control YES / NO			
Date of entry (or re-entry) into the UK / /			
Nat. Ins. No Marital Status	Married / Single / Divorced / Separated		
Number of children Ages	Do they live with you Yes / No		

## PLEASE COMPLETE ALL SECTIONS IN CAPITAL LETTERS

Subject to the Rehabilitation of Offenders Act please answer the following questions:

Please choose correct answer:

Have you ever been cautioned by the Police? YES NO

Have you ever been prosecuted for a criminal offence or are there any prosecutions pending? YES NO

Have you ever been prosecuted for a motoring offence or are there any prosecutions pending? YES NO

Have you ever been a party to an action in any court or tribunal? YES NO

Have you ever been declared bankrupt or made a deed by arrangement? YES NO

Have any orders been made against you by a Civil or military Court or Public Authority YES NO

If the answer to any of the above questions is 'YES', give full details below:

#### EMPLOYMENT / UNEMPLOYMENT HISTORY FOR 5 YEARS

- For each previous employer please provide the information requested below.
- If you have been unemployed, please supply details of the unemployment benefit office and dates that dealt with your claim & any reference number you may have.
- Please do not leave gaps in dates we must have a continuous record for the last FIVE years.
- Any gaps in history will result in a delay in processing your application
- Please include full school & college details if attended within the last FIVE years.
- Please continue on a separate sheet if necessary.

Ref No.	Employers Full Name, Address & Telephone / Fax numbers/ E-mail Or Unemployment Office/Job Centre/DSS Office	Position Held Salary	Start Date	Leaving Date	Reason for Leaving
Most Recent Employment					
2.					
3.					
4.					
5.					

## EMPLOYMENT / UNEMPLOYMENT HISTORY FOR 5 YEARS

Ref No.	Employers Full Name, Address & Telephone / Fax numbers/ E-mail Or Unemployment Office/Job Centre/DSS Office	Position Held Salary	Start Date	Leaving Date	Reason for Leaving
6.					
7.					
8.					
9.					
10.					
11.					
12.					

### EMPLOYMENT / UNEMPLOYMENT HISTORY FOR 5 YEARS

Ref	Employers Full Name, Address & Telephone / Fax numbers/ E-mail Or Unemployment Office/Job Centre/DSS Office	Position Held	Start	Leaving	Reason for
No.		Salary	Date	Date	Leaving
13.					

\* YOU MUST HAVE COMPLETED THIS SECTION AS FULLY AS POSSIBLE – EVEN IF YOU WERE OUTSIDE THE UK FOR ANY PERIOD IN THAT TIME YOU MUST GIVE US DETAILS.

ARMED SERVICE/ POLICE SERVICE PARTICULARS:			
Regiment/Force etc	Rank	Date Joined	
Date discharged/retired	No.		
Conduct (Ors only, as shown in Discharge Document)			

# FULL TIME AND ANY PART TIME SPECIALIST COURSES ATTENDED & DETAILS OF PROFESSIONAL QUALIFICATIONS OBTAINED (EG. NVQ, CITY IN GUILDS ETC)

Name, Address & Fax/Phone	Date		Standard or Results/ Certificate Number/
of School	From	То	Reference Number
Course Taken			
Name, Address & Fax/Phone of School	Da From	ate To	Standard or Results/ Certificate Number/ Reference Number
Course Taken			
Name, Address & Fax/Phone of School	Da From	ate To	Standard or Results/ Certificate Number/ Reference Number
Course Taken			
Name, Address & Fax/Phone of School	Da From	ate To	Standard or Results/ Certificate Number/ Reference Number
Course Talon			
Course Taken		i .	I .

### **SELF EMPLOYMENT**

If you have been self employed for any period, please give name, nature and address of your business and two business referees Accountant/Solicitor only (not included under personal referees) whom we can approach to confirm the periods stated.

Please note the following must be supplied for each period of self-employment please continue on a separate piece of paper if necessary.

Name and address of Business	Referee 1 Name and Address
Nature of Business	Profession
······	
From To	Profession

#### PERSONAL REFEREES

These must be persons who have known you continuously for at least five years and can vouch for your good character – they may not be a previous employer or relative.

Referee 1: Name and Address	Referee 2: Name and Address
Postcode	Postcode
Tel	Tel
Profession	Profession
How Long Known	How Long Known

### **SCREENING & VETTING DECLARATIONS:**

I certify that to the best of my knowledge, the information that I have given by me in this application is true and complete to the best of my knowledge and belief. I understand that any false statement or omission may render me liable to prosecution or dismissal without notice. I fully understand the consequences which may arise as a result of knowingly making a false declaration to gain employment or pecuniary advantage. (Theft Act 1968 Section 16). I accept that I may be required to undergo a medical examination where requested by the Company and I consent to the results of such examination being given to a Company Director. I further understand that a credit agency check may be carried out on me and I give my consent to this.

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 authorize the company to approach Government agencies, former employers and personal referees for verification of my employment/unemployment record.

#### **DISCLOSURE:**

You may be employed in a position of trust by a company or one of its subsidiary companies we may have to apply for a Disclosure from the Criminal Records Bureaux. However, having a criminal record does not necessarily bar you from employment. If you wish to obtain more information please ask The Company Personnel Department for their Code of Practice or their policy statement regarding ex-offenders. Disclosure information is treated in a sensitive way and is restricted to those who need to see it to make a recruitment decision. The Disclosure information is not retained i.e. it is disposed of within the timescales; recommended in the CRB Code of Practice. By signing below you agree to this process.

#### **DATA PROTECTION ACT 1998:**

We will use the information you have given on this form (together with any information which we obtain with your consent from third parties) for assessing your suitability for employment within certain contracts managed by your employers. It may be necessary to disclose your information to our agents and other service providers.

By returning this form to us you consent to our processing sensitive personal data about you where this is necessary, for example information about your past employment, finances, ethnic origin or criminal offences. You also consent to the transfer of your information to your employers where this is necessary.

Your information will be held on our computer database and in our paper filing systems. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected.

Signature of Applicant	Date
Print Name	
Signature of Witness	Date
Position within Company/Relationship to Applicant	