

Office Use Only Start Date
SIA LICENCE No.

APPLICATION FOR EMPLOYMENT



Please answer all questions using BLOCK CAPITALS. If any entry is inapplicable insert "NO" or "N/A"
Please Tick (✓) appropriate boxes: A Complete 5 Year History Is Required by BS 7858:2019

PERSONAL INFORMATION Please bring **Passport; Visa** (if applicable); **SIA License** to interview [copy taken]

Title: Mr Mrs Miss Ms Surname:

All Forenames:

Please bring **Marriage Cert./Evidence** to interview [copy taken]

Previous Surname (including Maiden name):

Address:

..... Postcode: How long have you lived at this address:

Telephone Nos. Home: Mobile:

E-mail:

Place of Birth: Nationality:

Date & Place of Entry: Work Permitted? Yes No

Marital Status: Married Single Divorced Separated Widowed

Name and Address of Next Of Kin:

..... Relationship: Tel no:

Do you require full time or part time work? Full time Part Time Either

BACKGROUND INFORMATION

Please bring **Driving Licence** to your interview

National Insurance No:

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Do you hold a full UK Car Driving Licence: Yes No Licence No: [copy taken]

Do you own your own transport: Yes No Do you have any motoring offences: Yes No

If yes please give details:

Please continue on separate sheet if necessary.

SECURITY TRAINING

Please bring **certificates** to your interview [copy taken]

SIA approved training: Yes No If yes, Cert. No:..... Where trained

Do you hold a First Aid Certificate under the Health & Safety at Work Act? Yes No Expiry Date:.....

PHYSICAL RECORD

Sex: Male Female Weight:..... Height: Colour of Hair: Colour of Eyes:.....

Have you normal vision in both eyes Without Glasses: **Yes** **No** With Glasses: **Yes** **No**

Have you a normal Sense of Smell: **Yes** **No**

Name & Address of GP:.....

.....

May we request information from him/her if necessary **Yes** **No**

EDUCATION

Please bring certificates to your interview **copy taken**

Name of School/College etc.	Address	From	To	Examinations Passed

Are you a student at present **Yes** **No**

SERVICE RECORD

Please bring certificates to your interview **copy taken**

Did you serve in: Royal Navy Army R.A.F. Police Fire Service Merchant Navy

Dates From: To: Rank Attained: Conduct Rating:

Reason for Leaving..... Are you liable for recall: **Yes** **No**

Are you a member of any RESERVE involving Annual Training: **Yes** **No**

CRIMINAL/DISMISSAL RECORD

Have you ever been convicted or cautioned for any criminal offence and are there any pending prosecutions or summonses? **Yes** **No** If yes, please give details below.

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

No If yes, please give details below.

Date	Offence (indicate Conviction/Caution/Pending/Bankrupt/Debt)	Sentence

Please continue on separate sheet if necessary.

Have you ever been dismissed for misconduct by an employer? **Yes** **No** If yes give details & dates:

.....

CHARACTER REFERENCES

Please give the names, addresses and occupations of two persons who have known you for a minimum of 2 years immediately prior to application and who are not related, living at the same address and who are not a former employer whom reference may be made:

Name:		Name:	
Address:		Address:	
Postcode:	Tel no:	Postcode:	Tel No:
E-mail:		E-mail:	
Occupation:		Occupation:	
How long known:		How long known:	

BUSINESS & TRADE 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:	Tel no:	Postcode:	Tel No:
E-mail:		E-mail:	
Occupation:		Occupation:	
How long known:		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)

Dates (Month & Year)	Name & Address of Employer or Unemployment Office (including Postcode)	Telephone No., Contact & E-mail	Job Title and Reason for Leaving	Office Use Only		
				date & contact	from/to	initial
1 From			Job			
To			Reason			
	Postcode					
2 From			Job			
To			Reason			
	Postcode					

3 From			Job			
To			Reason			
	Postcode					
4 From			Job			
To			Reason			
	Postcode					
5 From			Job			
To			Reason			
	Postcode					
6 From			Job			
To			Reason			
	Postcode					

Continue on further sheet if required Yes []

Read all the sections below and these will form part of the terms of your employment when you commence work with the Company. By signing the application form you agree to abide by all the following:

Confidentiality

You acknowledge that during the course of your employment you will have access to Confidential Information belonging to the Company. You shall not at any time during (except in the proper course of carrying out your duties) or after your employment whether directly or indirectly disclose to a third party or make use of any Confidential Information.

For the purposes of this section, “Confidential Information” shall include: information relating to business methods; corporate plans; finances; business opportunities and development projects of the Company; trade secrets including designs or inventions belonging to the Company; all or any information relating to the marketing or sales of any past, present or projected product or service of the Company; and any information in respect of which the Company owes an obligation of confidentiality to a third party.

During your employment or within six months immediately after your employment with the Company ends, you will not, without the prior written consent of the Company, engage, whether directly or indirectly, in any business or employment which is in any way connected with the business of the Company including the Company’s current and prospective clients or customers or such other natural or legal person that the Company is in the habit of doing business with.

Health & Safety and PPE

You agree to follow the company’s health & safety procedures and wear personal protective equipment (PPE) where required. You agree to gain and continually update your understanding of the Company’s health and safety procedures, observe them, and ensure that safety equipment and clothing are always used. The Company’s health and safety information is in the employee handbook.

Changes to Terms of Employment

You acknowledge that the Company reserves the right to make reasonable changes to any of your terms and conditions of employment from time to time.

DECLARATION

I understand that my employment is subject to satisfactory vetting and references in accordance with BS 7858:2019. 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 Novus Altair in providing additional information required to meet these criteria I authorise Novus Altair 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 Novus Altair 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.

Signature of applicant: Date:

May we approach your present employer for references immediately **Yes [] No []**

(Note: your present employer will not be approached without your permission.) If you have answered the above 'No' then may we approach your present employer for references after you leave them **Yes [] No []**

WORKING TIME DIRECTIVE

This agreement is made between Novus Altair Ltd
and
Name of Employee:
Address:

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.

Signature of Employee:

Date: