

Integrity, Unit 5 Oak Tree Park, Burnt Meadow Road, Moons Moat Industrial Estate, Redditch, B98 9NW.
Tel. 0845 643 5751 Fax. 0845 643 5752

Private & Confidential: Application for Employment

Fosition applied for						
Area / City						
SECTION 1: PERSON	AL INFO	RMATION				
Please print all information clea	arly in block	capitals using blac	ck ink.			
Surname			Forename(s)			
Previous Name(s)			Known as			Title
Date of Birth			National Insura	nce No.		
Please note that we require	5 years of a	ddress history,	if you have not live	ed at the below	address for 5	years then pleas
provide the outstanding prev Address						
Town			Post Code			
County			Country (if not to	IIK)		
Telephone			Fax	OK)		
Mobile			Email			
WOODIC			Eman			
Are you a SIA License holder?	YI	ES / NO	SIA License No	Э.		
				4		
Do you hold a valid Driving License?	YI	ES / NO	Driving License	e No.		
Do you have your own transport?	YI	ES / NO	Are you eligible in the UK?	e to work	YES /	NO
SECTION 2: EDUCAT	TION HIS	STORY				
School / University / College	e					
Address						
Period of Study		From		То		
Qualifications Awarded & Gr	rade					
School / University / College	5					
Address						
Period of Study		From		То		
Qualifications Awarded & Gr	rade					



Course Title		MM/YYYY Completed	Duration	Course	Provider	Qualification , (if none please state)	
		•					
			 				
			<u> </u>				
			ļ				
			<u> </u>				
SECTION 3: EMPLO	OVMEN	т шсто	DV				
SECTION 3. EMPLO	<i>)</i> 1 1411:11	1111310	<u>K1</u>				
Please detail your employme finished your education in or any other gaps between jobs information Section 7.	rder to be	able to proces	s your applica	tion. Pleas	e include any	periods of unemploym	ent and detail
Period of Employment	From	<u> </u>		То	<u></u>	Duration	
Company Name		<u> </u>			<u> </u>		
Address							
Job Title							
Name & Title of Line Manager							
Email:				Tel N	lo:		
Reason for leaving				<u>L</u>			
Period of Employment	From			То		Duration	
Company Name		-			L	<u>L</u>	_
Address							
Job Title							
Name & Title of Line Manager							
Email:				Tel N	lo:		

Reason for leaving



Period of Employment	From	То	Duration
Company Name		<u>'</u>	<u>'</u>
Address			
Job Title			
Name & Title of Line Manager			
Email:		Tel No:	
Reason for leaving			
Period of Employment	From	То	Duration
Company Name			
Address			
Job Title			
Name & Title of Line Manager			
Email:		Tel No:	
Reason for leaving			
Period of Employment	From	То	Duration
Company Name		•	
Address			
Job Title			
Name & Title of Line Manager			
Email:		Tel No:	
Reason for leaving			

Vetting and Screening

Any failure to provide relevant and accurate information or if supplied information is unsatisfactory we may have no alternative but to reject your application and/or withdraw any offer of employment. This is in accordance with BS 7858



SECTION 4: TRAINING

Please list any training you have received that is not detailed in the EDUCATION HISTORY section.

Course Title	MM/YYYY Completed	Duration	Course Provider	Accrediting Body

SECTION 5: FURTHER PERSONAL DETAILS

State any Criminal convictions (subject to Rehabilitation	on of Offe	enders Act	1974) If none state none.
Financial History			
List any Bankruptcy Orders or County Court Judgeme	ents includ	ing those 1	pending If none state none.
Leisure Interests			
Please list your leisure interests and to what level you	oursue the	m.	
	. 1	7 / 3 7	
Medical History (please fully complete the below	ticking \	Yes / No,	where Yes provide details).
			· ,
Medical History (please fully complete the below Question	ticking YES	Yes / No,	where Yes provide details). Details
Question Do you suffer from or have history of any muscular			* ,
Question			* ,
Question Do you suffer from or have history of any muscular or skeletal injuries (inc back pain).			*
Question Do you suffer from or have history of any muscular or skeletal injuries (inc back pain). Are you colour blind in any way.			*
Question Do you suffer from or have history of any muscular or skeletal injuries (inc back pain). Are you colour blind in any way. Have you or any member of your family any history			* ,
Question Do you suffer from or have history of any muscular or skeletal injuries (inc back pain). Are you colour blind in any way.			* ,
Question Do you suffer from or have history of any muscular or skeletal injuries (inc back pain). Are you colour blind in any way. Have you or any member of your family any history			* ,

Do you have a good sense of smell

Do you have any allergies.

panic attacks, mental illness.

Do you suffer from diabetes

Are you prone to fitting, seizures, faints etc

Do you suffer from high blood pressure.

Do you have any hearing difficulties.

Are you under any medication at all

Have you ever suffered from nervous breakdown,



Please list any special needs that you require that will enable you to carry out your duties satisfactorily. Emergency contact details Name Address Telephone Mobile Relationship to you When can you start? Availability to start What shifts can you work? Shift preference Days / Nights / Roster / No preference Pre-booked holidays? Holiday dates **Uniform Sizes**

Item	Size
Waist	
Inside leg	
Chest	
Collar	
High Visibility Jacket	S / M / L / XL / XXL / XXXL
Shoes	

Bank details (these can be provided later if you prefer)

Account name	Sort Code	Account No	Bank Name	Branch address



SECTION 6: REFEREES

Name

Before we can proceed with your application we require 2 character references- person not related to you and who has known you at least 5 years (friends, neighbours, work colleagues etc are ideal).

Address	
Telephone	
Email (preferred)	
Telephone	Mobile (if available)
How do you know this	Length of time they
person?	have known you?
Name	
Address	
Telephone	
Email (preferred)	
Telephone	Mobile (if available)
How do you know this	Length of time they
person?	have known you?
SECTION 7: ADDITIONAL INFO	<u>ORMATION</u>
Why do you want to work for Integrity Secur	with Crown I tdD
why do you want to work for integrity Secur	nty Group Ltu:
General continuation space (Use this box to	supply extra details from other sections of your application if required).
General continuation space. (Ose this box to	supply extra details from other seedons of your application in requiredy.



SECTION 8: DECLARATION

I agree not to divulge any information however acquired relating to the Company, its Business or its Customers to any other Person, Company or Organisation without written consent from the Company either during or after employment is determined.

I agree to abide by the rules and procedures of the company at all times and I agree to personal searches as and when required.

I agree to attend Training Courses and / or First Aid training appropriate to my employment as identified and mutually agreed by the Company and myself.

During my employment with the Company I consent to a medical examination carried out by a company nominated Doctor if required.

I have detailed my previous 5 years history, and consent to the company contacting such persons, including character references, as necessary to verify those details in accordance with British Standards 7858.

I understand that any offer of employment is subject to the satisfactory 5 years screening process.

I understand that any offer of employment is subject to 16 weeks probationary period.

I understand that if any information I have provided on this form is subsequently found to be false or misleading I will be liable to disciplinary procedures that could result in dismissal without notice.

I understand that it is a criminal offence to make false statements on this application form.

I confirm that if I commence employment with your company and if I am registered as unemployed, I will immediately inform the relevant authorities of my revised employment status.

I AGREE / DO NOT AGREE (please delete as appropriate), to my present employer being contacted BEFORE an offer of employment is made. I understand my present employer will be contacted after any provisional offer of a job, is accepted by myself.

Name:	Signed:	Date:	/	/

Applications sent via email are deemed to have been signed once submitted to Integrity Security Group Ltd for processing.



Continuation sneet	
I .	