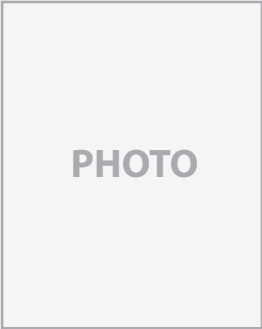




APPLICATION FORM

PLEASE AFFIX
CURRENT
PHOTOGRAPH



Dear Applicant,

Thank you for downloading our application form. Please ensure that you fill out the entire application form, completing as much detail as possible as this could affect your chances of being invited to an interview. Please send in your completed application form along with the following documents;

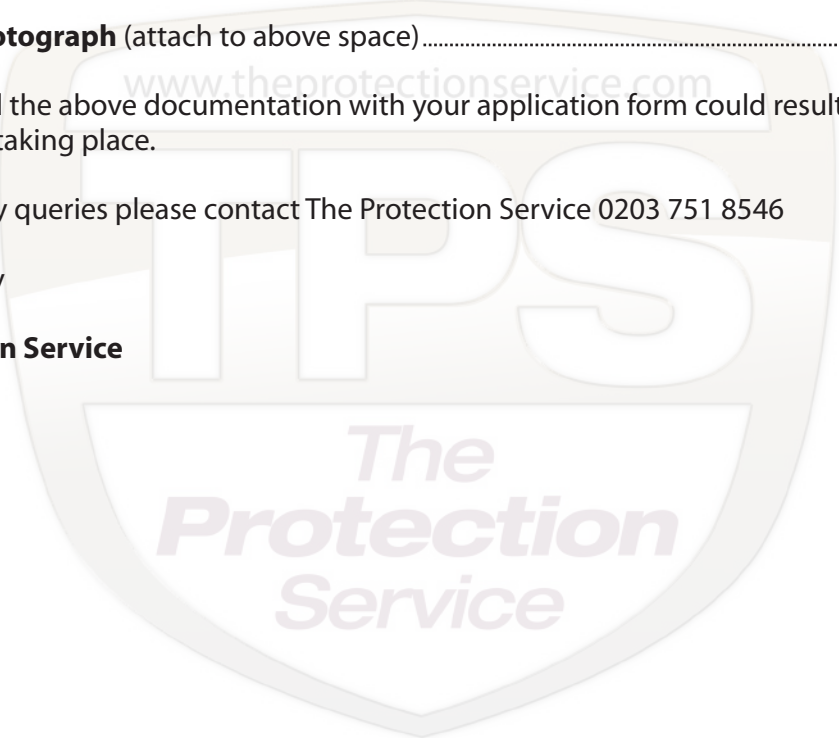
- 1. **Passport** (Photocopying all relevant Pages)
- 2. **Birth certificate**
- 3. **Driving licence**
- 4. **Utility bill or a document with your current address on it.**
- 5. **A Written reference**
- 6. **Current Photograph** (attach to above space)

Failure to send the above documentation with your application form could result in an interview not taking place.

If you have any queries please contact The Protection Service 0203 751 8546

Yours sincerely

The Protection Service
Management





APPLICATION FOR EMPLOYMENT

OFFICE USE ONLY

POSITION APPLIED FOR (TICK BOX)

Security Officer

Other Staff

I.D. No.:

Confidential

1. This Application Form, when completed, contains the basic information from which a candidate is assessed. Please ensure you complete this form in BLOCK CAPITALS, in your own handwriting and in black ink.

2. Ensure full details of previous employers and their addresses are entered as this will facilitate reference checks. Any gaps in your employment record must be fully explained.

TITLE: Mr / Mrs / Miss / Ms (circle) SURNAME:.....

Surname at Birth:..... FORENAMES:..... (If different from above)

Address:..... Post Code:.....

Tel No. Mobile No. Email Address:.....

Date of Birth: Place of Birth:.....

SIA Licence Number: Sector Applied To:.....

For the purposes of the Asylum and Immigration Act 1996, it is necessary for an employer to establish that an employee is entitled to work in the United Kingdom, and, if so, to establish if any restrictions under the Act applies to the employee. The following questions must therefore be answered to satisfy this requirement.

Nationality: Are you permitted to work in the U.K.? YES/NO

Date and Place of entry into U.K.: Work Permit Expiry Date: (If applicable)

National Insurance No: Passport No:

Person to contact in emergency / Next of Kin: Name: Address: Post Code: Their Telephone No. (Work) Their Telephone No. (Home)



I.D. No.:

DRIVING LICENCE

Driving Licence: FULL / PROVISIONAL / NONE Licence No:.....

Own Transport: YES / NO Have you ever been disqualified from driving ? YES / NO

Enter details of any motoring convictions or endorsements in the last 5 years:.....

SERVICES RECORD

Services: ARMY / ROYAL NAVY / RAF / FIRE / POLICE / OTHER (specify)

Unit or Regiment: Rank: Service No.

From: To: Conduct Assessment on discharge:

Are you a member of any reserve which will require annual training or service? YES/ NO

If YES give details

OFFENCES, CAUTIONS AND CONVICTIONS

OFFICE USE ONLY

- 1. Have you ever been Cautioned by the Police ? YES / NO
2. Have you ever been convicted, fined or had any order made against you by a Criminal, Civil or Military Court ? YES / NO
3. Are you aware of any Police investigations in which you may be involved? YES / NO

Empty box for office use only

If the answer to either question 1, 2 or 3 above is YES, give details:.....

N.B. Disclosure is not required where there is a conviction to which the provisions of the Rehabilitation of Offenders Act 1974 applies. Failure to disclose an unspent conviction may result in summary dismissal. If you are unclear about any of these questions ask the interviewer.

FINANCIAL LIABILITIES

Have you any outstanding debts or attachments of earnings? YES / NO
If YES, give details:

Have you ever been declared bankrupt / insolvent? YES / NO.
If YES, give details:

Are you the subject of any County Court proceedings? YES / NO
If YES, give details:



I.D. No.:

SECONDARY EDUCATION RECORD

School attended: From: To: Qualifications

FURTHER EDUCATION RECORD

College / University attended: From: To: Qualifications

PERSONAL REFERENCES

Give the names and address of two persons (not former employers or relatives) who have known you for at least 2 years.

Name: Address: Post Code: Tel. No.: How long known: (repeated for two persons)

SELF-EMPLOYMENT REFERENCES

If you have been self-employed please give references of people who can confirm the details

TRADE

Name: Address: (with dotted lines for continuation)

ACCOUNTANT

Name: Address: (with dotted lines for continuation)

EQUAL OPPORTUNITIES

This section is voluntary and will NOT be used in assessing your application. The Protection Service is an equal opportunities employer. If you choose to complete this section it will help us to monitor the effectiveness of our Equal Opportunities Policy. Please tick the appropriate box below.

My ethnic origin is: African: Asian: Caribbean: White: Other: (please specify):



I.D. No.:

EMPLOYMENT RECORD

State all periods of employment, unemployment and self employment for the last 10 years or since leaving school.

For any periods of unemployment, state the address of the Unemployment Benefit Office at which you reported.

Start with present situation.

Employers Details (BLOCK CAPITAL LETTERS)	Employment Details	Dates	Office Use
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	



OFFICE USE ONLY

I.D. No.:

EMPLOYMENT RECORD (Continued)

Employers Details (BLOCK CAPITAL LETTERS)	Employment Details	Dates	Office Use
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	
Name: Address: Tel No:	Position Held: Work No: Reporting To: Salary/Wage Per Week: Reason for Leaving:	From: To:	

FOR OFFICE USE ONLY

Insert date/year in appropriate box

Year 1

D N O S A J J M A M F J

Year 2

D N O S A J J M A M F J

Year 3

D N O S A J J M A M F J

Year 4

D N O S A J J M A M F J

Year 5

D N O S A J J M A M F J

Year 6

D N O S A J J M A M F J

Year 7

D N O S A J J M A M F J

Year 8

D N O S A J J M A M F J

Year 9

D N O S A J J M A M F J

Year 10

D N O S A J J M A M F J

5 Year Screening - Completed by →

Date:

5 Year Screening - Authorised by →

Date:

10 Year Screening Commenced

Date:



OFFICE USE ONLY

I.D. No.:

DECLARATION

Please read this carefully before signing this application.

I hereby certify that to the best of my knowledge, the details I have given in this application are complete and correct. I understand that to make a false statement to the Company, or its representative(s), in pursuance of my application, will constitute Gross Misconduct which, if proven, may result in summary dismissal without notice.

I understand that employment with the Company is subject to satisfactory vetting in accordance with BS 7858:2004, and I undertake to co-operate with the Company in providing any additional information required to meet this criteria. I authorise the Company, to approach previous employers, schools/colleges, personal referees or Government Agencies to verify that the information I have provided is correct.

I understand that some of the information I have provided in this application will be held on a computer database and some or all will be held in manual records.

SIGNATURE:

PRINT NAME:

DATE:

