

Dear Applicant,

Please complete the application form and attach the following.

- Copy of passport (including Visa page if applicable)
- Copy of SIA badge
- 2 x passport size photographs
- 2 x proof of address
- Copy of academic record
- Copy of training records
- Copy of DVLA [if you have one]
- Copy of NI Card

Please ensure that you bring the **original** documents with you on the day of your interview.

For Office Use Only:
Candidate Number:

APPLICATION FORM
CONFIDENTIAL

FMT Security is committed to becoming an Equal Opportunities Employer. All appointments will be made in line with our Equal Opportunities policy.

Please complete in **type** or black ink.

POST TITLE: S/O	CLOSING DATE:	POST REFERENCE:
PERSONAL DETAILS:		
Surname: Forename(s): Initials: Telephone: Home: Work: National Insurance Number:	Address: Post Code: Email address:	
Next Of Kin Details: Name: Address Telephone: Home: Work:		
Criminal Record Information:		
Subject to the Rehabilitation of Offenders Act 1974, have you ever been cautioned or convicted of a criminal offence?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please give brief details: _____		
Have any County Court Judgments been issued against you?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please give brief details: _____		
Have you ever been declared Bankrupt?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please give brief details: _____		

Security Qualifications:

Do you hold any of the following certificates?

Yes No

Do you hold any valid SIA Licences

Yes No

License Number: _____ Date Expires: _____

License Number: _____ Date Expires: _____

Have you passed the Level 2 training course for your SIA Licence(s)

Yes No

Is your training: (tick box only)

Door Supervision: Security Guarding: CCTV: Close Protection:

Please give the awarding body: (E.g. IQ Edexcel, NOCN etc.): _____

Please give the award date: _____ (and) _____

Emergency Contact Details:

This information will only be used if you are accepted for training and/or employment

Name: _____ Their relationship to you: _____

Their phone number(s): _____

If you have lived outside the UK more than 5 years ago, please give your home (or family) address:

Jobcentre Details:

Within the last five years have you been registered with a Jobcentre?

Yes No

Details (If yes): Jobcentre _____ Date From ___/___/___ Date To ___/___/___

Jobcentre _____ Date From ___/___/___ Date To ___/___/___

Jobcentre _____ Date From ___/___/___ Date To ___/___/___

5 Year Employment and Education History:

Please account for the whole of the last 5 years, including unemployment, self-employment and education. If you were overseas during any of this time please include the details, although it is your responsibility to provide references of employment for these periods. If you were not working for any period, please state if you were unemployed and claiming benefit or, unemployed and unregistered. Start with your current position and work backwards.

- For each previous employer please provide the information requested below.
- 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.

EDUCATION AND TRAINING (Please include all education and training undertaken)

School/College/Other	Qualification	Grade	Year

EMPLOYMENT HISTORY

Present/Most recent Employment

Name and Address of Present Employer:

Job Title:

Date Commenced:

Present Salary:

Period of Notice Required:

Duties:

Reason for wishing to leave:

PREVIOUS EMPLOYMENT: From most recent post

Dates From - To <i>Month & Year</i>	Employer Name, Address, Phone Numbers, Email addresses	Job Title/Duties	Salary	Reason for leaving
	Name: Address: Post Code: Tel: Email:			
	Name: Address: Post Code: Tel: Email:			
	Name: Address: Post Code: Tel: Email:			

EXPERIENCE AND ACHIEVEMENTS

Please explain how you would relate your education, training and experience (including that not related to employment) to the requirements of the post for which you are applying.

LEISURE INTERESTS:

PERSONAL REFERENCES:

Please give the names, addresses, telephone numbers and status of three referees who are willing and able to give an opinion on your abilities and academic/professional experience. One referee should be your present or past employer.

References are normally taken up when the applicant is being invited for interview, unless you have specifically requested otherwise in this section.

1.

Email address:-

2.

Email address:-

3.

Email address:-

If your present employer is not quoted please state reason why.

If an offer is made and accepted we reserve the right to contact your present employer.

ADDITIONAL INFORMATION:

Where did you learn of this vacancy?

Please give any dates in the near future when you are not available for interview.

Please supply details of any unspent Criminal convictions as defined under the Rehabilitation of Offenders Act 1974.

Please record how many days you have lost from work in the past 2 years, as a result sickness, supplying details if appropriate.

Equal Opportunities Monitoring Form

Post Number:

Family Name: Given Names.....

Preferred Title:Date of Birth:

Equal Opportunities

The following questions are designed to allow FMT Security to fulfil its statutory obligations in respect of monitoring its Equal Opportunities and Race Relations Policies. The information is not used in the selection of candidates.

Gender: MALE / FEMALE (Please circle one)

Nationality (Country of Birth/Passport)

.....

Do you require a work permit for the UK?

YES / NO (Please circle one)

The Disability Discrimination Act 1995 defines disability as “a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.” **On this basis do you consider yourself disabled?** (Please circle one option below) YES (Please give details)

NO

What is your ethnic group?

(Please tick the appropriate group)

- White British
- White Irish
- Other white background
- Please state _____
- Mixed - White and Black Caribbean
- Mixed - White and Black African
- Mixed - White and Asian
- Other mixed background
- Please state _____
- Asian or Asian British - Indian
- Asian or Asian British - Pakistani
- Asian or Asian British – Bangladeshi
- Other Asian background
- Please state _____
- Black or Black British – Caribbean
- Black or Black British – African
- Other Black background
- Please state _____
- Chinese
- Other ethnic group
- Please state _____

National Identity

(Please tick the appropriate boxes)

We are obliged to report to the Higher Education Statistics Agency on the National Identity of our staff. This is different to both Nationality and Ethnicity, in that your National Identity is how you view yourself: it could, for instance, be based on culture, language or ancestry/family history.

Please choose either one or two categories from the following list, and mark your main choice 1. If you view yourself as having more than one National Identity, please mark your second choice 2.

- | National Identity | Choice |
|--------------------------|--------------------------|
| British | <input type="checkbox"/> |
| English | <input type="checkbox"/> |
| Irish | <input type="checkbox"/> |
| Other | <input type="checkbox"/> |
| Information Refused | <input type="checkbox"/> |
| Scottish | <input type="checkbox"/> |
| Unknown | <input type="checkbox"/> |
| Welsh | <input type="checkbox"/> |



BANK DETAILS

CONFIDENTIAL

Bank Name: _____

Account Name: _____

Account Number: _____

Sort Code: _____

Bank Address: _____

Print Name: _____

Signature: _____

Date: _____



Personal Statement:

Please use this opportunity to support your application, stating why you would like to work with FMT Security.

A large, empty rectangular box with a thin black border, intended for the applicant to write their personal statement.



Declaration and Consent:

I understand that if I am offered employment with FMT Security, I will be required to work day or night shifts including weekends as determined by operational requirements.

I certify that to the best of my knowledge, the information that I have given in my application for employment is true and complete and understand that any false statement or omission to the Company or its representatives may render lead to termination of employment without notice. 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 authorise the Company or its agents to approach Government agencies, former employers, educational establishments, criminal justice agencies and personal referees for information relating to and verification of my employment/unemployment record. I consent to the Company's reasonable processing of any personal 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 Reports Act 1988, I consent to the results of such examinations to be given to the Company and 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 further declare that any documents that I provide as proof of my identity, proof of address, proof of right to work and any other documents that I provide are genuine and give my consent for these documents to be examined under a UV scanner or similar device. I acknowledge that any falsified documents may be reported to the appropriate authority.

DATA PROTECTION ACT 1998:

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 services 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 also consent to the transfer of your information to your current and future potential employers where this is necessary (this may be to companies operating abroad if you apply for work outside the United Kingdom).

Your information will be held on our computer database. It will be held as scanned images and/or in our paper filing systems. By signing below you agree to this process and confirm that you do not have a criminal record subject to the current Rehabilitation of Offenders Act and any amendments. 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.

I hereby certify that, to the best of my knowledge, the details I have given in this application form are complete and correct and I understand that any false statement or omission to the Company may render me liable to dismissal without notice.

Signed: _____

Dated: _____



DISCLOSURE:

You are applying for a position of trust and in the event of being offered employment by the Company we may apply for a Disclosure. However, having a criminal record does not necessarily bar you from employment. For more information ask a member of staff for a copy of the DBS code of Practice/ Disclosure Scotland and/or Company our 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. By signing this document you allow the Company to see a copy of the disclosure. The Disclosure information is not retained i.e. it is disposed of within the timescales recommended in the DBS Code of Practice. By signing below you agree to this process.

SCREENING:

Any offer of employment is subject to satisfactory screening and that the applicant consents to being screened and will provide information as required. That the information provided is correct, and the applicant acknowledges that any false statements or omissions could lead to termination of employment.

I hereby certify that, to the best of my knowledge, the details I have given in this application form are complete and correct and I understand that any false statement or omission to the Company may render me liable to dismissal without notice.

Signed: _____ Dated: _____

If you have not heard from us within 4 weeks of submitting your application, please consider that you have not been successful on this occasion

Thank you for completing the form. Please return it to:

SUITE 1, 4 QUEEN STREET, EDINBURGH, EH2 1JE

or e-mail hr@fmtsecurity.com

For Office Use Only:

Candidate Number: _____

Interviewed By: _____

Training: _____

Results: _____

Comments: _____