				VETTI	NG FROM:		1	1
A	lst Hiance			VETTE (12/16 w the above	eeks from		1	,
PLEASE	S.I.A. LICENCE NUMBER							
AFFIX PHOTOGRAPH	EMPLOYMENT AS:							
	Date:  CONFIDENTIAL WHEN COMPLETED							
	UESTIONS USING BLOCK CAPIT LL INFORMATION	TALS						
SURNAME:			FIRST NAMES;					
CURRENT ADDRESS:			TELEPHO	NE:				
/\DDI\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			MOBILE	NO:				
PREVIOUS ADDRESS			CURRENT DRIVING LICENCE					
IF LESS THAN 3 YEARS AT			CAR OWN	NER:	YES	NO	(dele	te)
ABOVE,			INSURANC	E No				
	S (complete at intervi	,	SORT COL	)F				
PLACE OF BIRTH:	: IN THE UK				IF BORN	OUTS	IDE TH	E UK:
DATE OF BIRTH:		AGE						
HEIGHT:	WEIGHT	:			COLOUR OF EYES:			
3. PERSON/NEXT NAME: Address:	T OF KIN TO BE CONT							
Telephone number:								

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4. HAVE YOU EVER APPEARED BEFORE A COURT CHARGED WITH A CRIMINAL, CIVIL OR MILITARY OFFENCE AND BEEN CONVICTED INCLUDING ANY MOTORING OFFENCES HAVE YOU ANY ALLEGED OFFENCES OUTSTANDING. IF YES, GIVE DETAILS: YES NO PERSONAL REFEREES 5. PLEASE GIVE DETAILS OF TWO PEOPLE, OTHER THAN FAMILY WHO HAVE KNOWN YOU FOR AT LEAST 2 YEARS OUT OF THE LAST 5 YEARS WHO WE CAN APPROACH FOR A REFERENCE: Name: Name: Address: Address: Period Known: **Period Known:** TEL TEL NO: NO: PERSONAL HISTORY (PART A) 6. THE SECURITY SCREENING PROCESS REQUIRES THAT WE ARE ABLE TO VERIFY YOUR PERSONAL HISTORY FOR A PERIOD OF TEN OR FIVE YEARS OR TO DATE OF LEAVING SCHOOL. PLEASE GIVE DETAILS OF YOUR PERSONAL HISTORY, IDENTIFY IN THE SPACE PROVIDED ALL PERIODS OF EMPLOYMENT SELF EMPLOYMENT, REGISTERED OR UNREGISTERED UNEMPLOYMENT (STATE THE UNEMPLOYMENT OFFICE WHICH YOU REPORTED TO), MILITARY SERVICE. BE SURE TO GIVE FULL ADDRESSES INCLUDING, TELEPHONE NUMBERS AND DATES. **EMPLOYERS NAME,** NAME OF THE PERSON **POSITION YOU HELD EMPLOYMENT REASON** YOU REPORTED TO. **DATES INCLUDE** FOR **ADDRESS MONTHS LEAVING** FROM 1 TO **TELE No: FROM** 2 TO **TELE No: FROM** 3 TO TELE No: FROM 4 TO **TELE No:** FROM 5 TO **TELE No:** FROM 6 TO

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**TELE No:** 

EMPLOYERS FULL NAME, ADDRESS	NAME OF THE PERSO YOU REPORTED TO.		YOU HELD	EMPLOYMENT DATES INCLUDE MONTHS	REASON FOR LEAVING		
				FROM / / TO / _ /		7	
TELE No:				FROM			
						8	
TELE No:				FROM			
						9	
TELE No:				FROM			
				TO //_		10	
TELE No:				FROM			
				TO		11	
TELE No:				FROM			
				TO		12	
TELE No:							
7. PERSONAL HISTORY (PART B) IN THE CASE OF PERIODS OF SELF-EMPLOYMENT PLEASE GIVE NAMES AND ADDRESSES OF SOMEONE WHO CAN CONFIRM YOU'RE DETAILS (ie; BOOK KEEPER, ACCOUNTANT, and OR SOLICITOR).							
HAVE YOU BEEN MADE BANKRUPT? YES/NO (please specify)  DO YOU HAVE ANY COUNTY COURT JUDGEMENTS? YES/NO DO YOU OBJECT TO THE COMPANY CONTACTING A CREDIT AGENCY WITH REFERENCE TO YOURSELF? YES/NO							
8. DETAILS OF WHEN YOU LEFT SCHOOL & IF YOU ATTENDED COLLEGE IN THE LAST 10 YEARS							
SCHOOL NAME: (secondary only)	OWN/CITY:	DATE YOU LEFT SCHOOL:	(	COLLEGE & DATES:			
9. MEDICAL INFORM	ATION		•				
DO YOU SUFFER FROM ANY ILLI	NESS OR DISABILITY?		IF YES PLE	ASE SPECIFY			
YES NO (delete)							
Employees working on night duties may be required to undertake a medical, for further							

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information contact head office

## READ THIS SECTION CAREFULLY BEFORE YOU SIGN THE STATEMENT

- 1. IF OFFERED EMPLOYMENT IT WILL BE INITIALLY FOR A PROBATIONARY PERIOD OF 16 WEEKS. AFTER A PERIOD OF 12 WEEKS FROM START DATE FOR SCREENING:
- 2. DURING THE PROBATIONARY PERIOD YOUR CONTRACT OF EMPLOYMENT MAY BE TERMINABLE BY THE "COMPANY" BY NO LESS THAN 24 HOURS NOTICE IN WRITING. THIS APPLIES TO SCREENING PERIOD ALSO.
- 3. CONTINUED EMPLOYMENT IS CONDITIONAL UPON SATISFACTORY SCREENING AND GENERAL PERFORMANCE.

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<u>STA</u>	TEMENT	TO BE SIG	NED BY A	PPLICAN	<u>NT</u>	
1	CERTIFY TH	AT TO THE	BEST OF MY	KNOWLE	DGE, THE INF	ORMATION I
HAVE GIVEN IS COMPLETE AN	ID CORREC	T, AN I UND	ERSTAND T	HAT MISR	EPRESENTA	TION OF FACTS
IS GROUNDS FOR IMMEDIATE	DISMISSAL	AND RENDE	RS ME LIAB	LE FOR PI	ROSECUTION	
I AUTHORISE THE COMPANY	TO APPRO	ACH ANY (	OVERNMEN	IT AGENC	CIES, FORMEI	R EMPLOYERS,
CREDIT AGENCIES AND PER						
SUPPLY A STATUTORY DECL	ARATION IF	REQUIRED	(I GIVE PERM	ISSION FOR	R MY PRESENT	EMPLOYER TO BE
APPROACHED).						
APPLICANTS SIGNATURE:				DATE	:	
	FC	OR OFFICI	E USE ONL	.Υ		
ASSOCIATED DOCUMENTS:		SEEN:		DATE:	<u>Cor</u>	PY RETAINED:
Birth Certificate/Passport	Yes	No.	0			
Bitti Gertineate/i assport						
S.I.A. Licence			]			
			J -			
Service Record						
			_			
Utility Bill/Bank Statement						
Juney Burne Statement						
N.B. PHOTOCOPIES OF ONE THE ABOVE DOCUMENTS ARE TO BE INCLUDED WITHIN VETTING PAPERS.						
INTERVIEWERS ASSESSMENT (office use only)						
Sense Tests a) colour blindness	OK/FAILED	b) Hearing	OK/FAILED	c) Smell	OK/FAILED	
INTERVIEWERS SIGNATURE:_				DATE:		
I HAVE CHECKED THE DETAILS OF THIS APPLICATION FORM AND CONFIRM THAT ALL INFORMATION IS CORRECT AT TIME OF INTERVIEW.						
PRINT NAME			SIGN			
(INTERVIEWER)						
Before proceeding with this application form						

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## **Notice to all Applicants**

1a (1<sup>st</sup> Alliance) services **Conforms** to the Standard of BS 7858 and as such all applicants must undergo a security screening process.

- 1. The application must be completed in full.
- A full 5 year work history (or in the case of a younger applicant a 10 year if the company requires the later for client or insurance reasons.
- 3 Personal references
- 4 Proof of I D
- 5 Proof of address
- 6 Medical history
- 7 National Insurance Check
- 8 Criminal Records Bureau Screening via the S.I.A.

As to enable us to process your application please supply the following in full

- 1 Full names, addresses and telephone numbers of previous employers
- 2 Full names, addresses and telephone numbers of personal references
- 3 Full details of any unemployment

Please bring the following items to your interview

- 1 Birth certificate
- 2 Passport(if held)
- 3 Two recent utility bills
- 4 Driving licence(if held)
- 5 Two passport size photographs
- 6 Bank details
- 7 P45 if you have one

Failure to complete this application form could result in your application being delayed or rejected. Any information supplied that is found to be fraudulent would result in dismissal or in some cases legal action being taken.

Before proceeding with this application

- 1 Do you agree to a S.I.A. Criminal record check being carried out? YES/NO
- 2 Do you fully understand the potential consequences? YES/NO
- 3 Do you agree to a credit check taken via a credit agency regards to yourself YES/NO?

Print Name	 	
Signature	 	
Date		

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