

 ASPRO	EMPLOYMENT APPLICATION FORM	 ASPRO
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**POSITION APPLIED FOR:** \_\_\_\_\_

The following Information Will Be Treated In the Strictest Confidence

**PERSONAL**

(Please complete this section in **BLOCK CAPITAL**)

Surname:		First Name(s):	
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Present Address:			
	Post Code	Dates From:	
Previous Addresses in the last 5 years including dates; (Continue on separate sheet if required)			
	Post Code	Dates From: / /	To: / /
	Post Code	Dates From: / /	To: / /
Email :			

Contact Tel No:		D.O.B:	
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Full Driving Licence:	<b>Yes / No</b>	Endorsements:	<b>Yes / No</b>
* If yes, Please give details:			

National Insurance number:		SIA Licence Number:	
			Expiry Date:
Nationality:		Marital Status:	

Are you involved in any activity which might limit your availability to work or your working hours e.g. local government	<b>Yes / No</b>
If YES, please give full details:	

Are you subject to any restrictions or covenants which might restrict your working activities:	<b>Yes / No</b>
If YES, please give full details:	

Are you willing to work overtime and weekends if required:	<b>Yes / No</b>
Please give details of hours you wish not to work:	

Have you any convictions (other than spent convictions under the Rehabilitation of Offenders Act 1974)	<b>Yes / No</b>
If YES, Please give full details:	

You may be required, if offered employment, as part of your application to complete a Pre-employment Medical Questionnaire. Are you prepared to undergo a medical examination prior to employment.	<b>Yes / No</b>
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Have you ever worked for this company before?	<b>Yes / No</b>
If YES, Please give details:	

Have you applied for employment for this company before?	<b>Yes / No</b>
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Do you need a work permit to take up employment in the UK?	<b>Yes / No</b>
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How much notice are you required to give to your current employer?	
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## EDUCATION

Schools attended since age 11	From	To	Examinations and Results
College or University	From	To	Courses and Results
Further Formal Training	From	To	Diploma/Qualification
Job related Training Courses Name of Organisation	Date	Subject	

Please give details of membership of any technical or professional associations:


Please list any foreign languages spoken and the level of competence:


<b>E1</b> Name of Co .....  Manager's Name .....  Address: ..... ..... Postcode:..... Telephone No. .... Fax No .....	<b>Dates Employed:</b> From: ...../..... To: ...../..... Position: ..... Salary: ..... Reason for Leaving: ..... ..... .....	Dates - Confirmed - YES/NO Reason for leaving - Confirmed - YES/NO Would re-employ - YES/NO To your knowledge has this man/woman got a criminal record? YES/NO Any reason to suppose an Insurance Company would not bond? ..... Person speaking to: ..... Position: ..... <b>Signed:</b> ..... <b>SUPVR/SSO</b> <b>Signed:</b> ..... <b>Vetting Officer</b> <b>Date:</b> .....
<b>E2</b> Name of Co .....  Manager's Name .....  Address: ..... ..... Postcode:..... Telephone No. .... Fax No .....	<b>Dates Employed:</b> From: ...../..... To: ...../..... Position: ..... Salary: ..... Reason for Leaving: ..... ..... .....	Dates - Confirmed - YES/NO Reason for leaving - Confirmed - YES/NO Would re-employ - YES/NO To your knowledge has this man/woman got a criminal record? YES/NO Any reason to suppose an Insurance Company would not bond? ..... Person speaking to: ..... Position: ..... <b>Signed:</b> ..... <b>SUPVR/SSO</b> <b>Signed:</b> ..... <b>Vetting Officer</b> <b>Date:</b> .....
<b>E3</b> Name of Co .....  Manager's Name .....  Address: ..... ..... Postcode:..... Telephone No. .... Fax No .....	<b>Dates Employed:</b> From: ...../..... To: ...../..... Position: ..... Salary: ..... Reason for Leaving: ..... ..... .....	Dates - Confirmed - YES/NO Reason for leaving - Confirmed - YES/NO Would re-employ - YES/NO To your knowledge has this man/woman got a criminal record? YES/NO Any reason to suppose an Insurance Company would not bond? ..... Person speaking to: ..... Position: ..... <b>Signed:</b> ..... <b>SUPVR/SSO</b> <b>Signed:</b> ..... <b>Vetting Officer</b> <b>Date:</b> .....
<b>E4</b> Name of Co .....  Manager's Name .....  Address: ..... ..... Postcode:..... Telephone No. .... Fax No .....	<b>Dates Employed:</b> From: ...../..... To: ...../..... Position: ..... Salary: ..... Reason for Leaving: ..... ..... .....	Dates - Confirmed - YES/NO Reason for leaving - Confirmed - YES/NO Would re-employ - YES/NO To your knowledge has this man/woman got a criminal record? YES/NO Any reason to suppose an Insurance Company would not bond? ..... Person speaking to: ..... Position: ..... <b>Signed:</b> ..... <b>SUPVR/SSO</b> <b>Signed:</b> ..... <b>Vetting Officer</b> <b>Date:</b> .....

<p><b>E5</b> Name of Co .....</p> <p>Manager's Name .....</p> <p>Address: .....</p> <p>.....</p> <p>Postcode:.....</p> <p>Telephone No. ....</p> <p>Fax No .....</p>	<p>Dates Employed:</p> <p>From: ...../..... To: ...../.....</p> <p>Position: .....</p> <p>Salary: .....</p> <p>Reason for Leaving:</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p>Dates - Confirmed - YES/NO</p> <p>Reason for leaving - Confirmed - YES/NO</p> <p>Would re-employ - YES/NO</p> <p>To your knowledge has this man/woman got a criminal record? YES/NO</p> <p>Any reason to suppose an Insurance Company would not bond? .....</p> <p>Person speaking to: .....</p> <p>Position: .....</p> <p><b>Signed:</b> ..... <b>SUPVR/SSO</b></p> <p><b>Signed:</b> ..... <b>Vetting Officer</b></p> <p><b>Date:</b> .....</p>
<p><b>E6</b> Name of Co .....</p> <p>Manager's Name .....</p> <p>Address: .....</p> <p>.....</p> <p>Postcode:.....</p> <p>Telephone No. ....</p> <p>Fax No .....</p>	<p>Dates Employed:</p> <p>From: ...../..... To: ...../.....</p> <p>Position: .....</p> <p>Salary: .....</p> <p>Reason for Leaving:</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p>Dates - Confirmed - YES/NO</p> <p>Reason for leaving - Confirmed - YES/NO</p> <p>Would re-employ - YES/NO</p> <p>To your knowledge has this man/woman got a criminal record? YES/NO</p> <p>Any reason to suppose an Insurance Company would not bond? .....</p> <p>Person speaking to: .....</p> <p>Position: .....</p> <p><b>Signed:</b> ..... <b>SUPVR/SSO</b></p> <p><b>Signed:</b> ..... <b>Vetting Officer</b></p> <p><b>Date:</b> .....</p>
<p><b>E7</b> Name of Co .....</p> <p>Manager's Name .....</p> <p>Address: .....</p> <p>.....</p> <p>Postcode:.....</p> <p>Telephone No. ....</p> <p>Fax No .....</p>	<p>Dates Employed:</p> <p>From: ...../..... To: ...../.....</p> <p>Position: .....</p> <p>Salary: .....</p> <p>Reason for Leaving:</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p>Dates - Confirmed - YES/NO</p> <p>Reason for leaving - Confirmed - YES/NO</p> <p>Would re-employ - YES/NO</p> <p>To your knowledge has this man/woman got a criminal record? YES/NO</p> <p>Any reason to suppose an Insurance Company would not bond? .....</p> <p>Person speaking to: .....</p> <p>Position: .....</p> <p><b>Signed:</b> ..... <b>SUPVR/SSO</b></p> <p><b>Signed:</b> ..... <b>Vetting Officer</b></p> <p><b>Date:</b> .....</p>
<p><b>E8</b> Name of Co .....</p> <p>Manager's Name .....</p> <p>Address: .....</p> <p>.....</p> <p>Postcode:.....</p> <p>Telephone No. ....</p> <p>Fax No .....</p>	<p>Dates Employed:</p> <p>From: ...../..... To: ...../.....</p> <p>Position: .....</p> <p>Salary: .....</p> <p>Reason for Leaving:</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p>Dates - Confirmed - YES/NO</p> <p>Reason for leaving - Confirmed - YES/NO</p> <p>Would re-employ - YES/NO</p> <p>To your knowledge has this man/woman got a criminal record? YES/NO</p> <p>Any reason to suppose an Insurance Company would not bond? .....</p> <p>Person speaking to: .....</p> <p>Position: .....</p> <p><b>Signed:</b> ..... <b>SUPVR/SSO</b></p> <p><b>Signed:</b> ..... <b>Vetting Officer</b></p> <p><b>Date:</b> .....</p>

## PRESENT OR LAST EMPLOYER

Are you currently employed? **YES/NO**

Are we able to approach your Present/Last employer? **YES/NO**

Name of present or last employer:	
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Address:	

Telephone No:	
Fax No:	

Nature of business:	
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Job title and a brief description of your duties:	

Length of Service:	From:	To:
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**DECLARATION AND CONSENT**

**INTERESTS, ACHIEVEMENTS, LEISURE ACTIVITIES** (e.g. hobbies, sports, club memberships)


**SUPPLEMENTARY INFORMATION**

Please set out below any further information to support your application, e.g. past achievements, future aspirations, personal strengths.


I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable to summary dismissal

**I consent for these details to be held in confidence by the Company, for the purposes of assessing this application, ongoing personnel administration and payroll administration (where applicable) in compliance with GDPR 2018.**

**Please note:**

You will be required to undergo a vetting check on commencement of you joining the organisation which the company will fulfil the cost of. If you leave the organisation within 16 weeks you will be required to bare the cost back to the organisation.

Signature: _____	Date: _____
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**PERSONAL REFERENCES**

Please give the names of at least one person whom we may approach for a character reference, who have known you for at least the previous three years. The personal references may NOT be a family member or previous employer.

<p><b>C1</b></p> <p>.....</p> <p>.....</p> <p>..... <b>POSTCODE:</b> .....</p> <p><b>TEL. NO.:</b> .....</p> <p><b>Email Address:</b> .....</p> <p><b>OCCUPATION:</b> .....</p> <p><b>Have you got consent from the personal reference to supply this information?</b>  <b>YES <input type="checkbox"/> NO <input type="checkbox"/></b></p>	<p><b>C2</b></p> <p>.....</p> <p>.....</p> <p>..... <b>POSTCODE:</b> .....</p> <p><b>TEL. NO.:</b> .....</p> <p><b>Email Address:</b> .....</p> <p><b>OCCUPATION:</b> .....</p> <p><b>Have you got consent from the personal reference to supply this information?</b>  <b>YES <input type="checkbox"/> NO <input type="checkbox"/></b></p>
<b>CHARACTER VETTING – Supervisor/SSO Only</b>	<b>CHARACTER VETTING – Supervisor/SSO Only</b>
<p><i>How many years have you known the applicant? .....</i></p> <p><i>In what capacity do you know the applicant? .....</i></p> <p><i>Are there any periods of six months or more where you were not in regular communication with the applicant? .....</i></p> <p><i>Can you recommend the applicant as suitable for a position of great trust and responsibility? .....</i></p> <p><i>Can you give your opinion as to the general character of the applicant?</i></p> <p>.....</p> <p>Signed:.....Supvr/SSO</p> <p>Date:.....</p> <p>Signed:.....Vetting Officer Date:.....</p>	<p><i>How many years have you known the applicant? .....</i></p> <p><i>In what capacity do you know the applicant? .....</i></p> <p><i>Are there any periods of six months or more where you were not in regular communication with the applicant? .....</i></p> <p><i>Can you recommend the applicant as suitable for a position of great trust and responsibility? .....</i></p> <p><i>Can you give your opinion as to the general character of the applicant?</i></p> <p>.....</p> <p>Signed:.....Supvr/SSO</p> <p>Date:.....</p> <p>Signed:.....Vetting Officer Date:.....</p>

Applicants must have the following ID (as per SIA requirements and BS7858:2012)

- Two identity documents from group A. At least one document must show your current address and at least one document must show your date of birth.
- Or**
- One identity document from group A and two documents from group B. At least one document must show your current address and at least one document must show your date of birth.

### **What do we mean by "group A" and "group B"?**

#### **Group A documents:**

- Signed valid passport of any nationality, or UK digital passport number entered on the application form – this is the preferred option as it will help us speed up the processing of your application.
- Signed valid UK photo driving licence (both parts of the full or provisional licence are required)
- UK original birth certificate issued within 12 months of birth

#### **Group B documents:**

- Valid EU photo ID card.
- Valid UK firearms licence with photo
- Signed valid UK paper driving licence.
- Marriage certificate or Civil Partnership certificate, with translation if not in English.
- UK birth certificate issued more than 12 months after date of birth, but not a photocopy.
- Non-UK birth certificate, with translation if not in English.
- UK adoption certificate
- P45 statement of income for tax purposes on leaving a job issued in the last 12 months.
- P60 annual statement of income for tax purposes issued in the last 12 months.
- Bank or building society statement issued to your current address, less than three months old. You can use more than one statement as long as each is issued by a different bank or building society.
- Mortgage statement issued in the last 12 months.
- Utility bill (gas, electric, telephone, water, satellite, cable) issued to your current address within the last three months. **You can only send us one utility bill in support of your application.**
- Pension, endowment or ISA statement issued in last 12 months.
- British work permit or visa issued in last 12 months.
- Letter from H.M. Revenue & Customs, Department of Work and Pensions, employment service, or local authority issued within the last three months. You can use more than one letter as long as each is issued by a different Government department or a different local authority.
- A credit card statement sent to your current address within the last three months. You can use more than one statement as long as each is issued by a different issuer.
- Council Tax statement issued in the last 12 months.
- Child benefit book issued in last 12 months.

**TO BE COMPLETED BY THE INTERVIEWER:**

<b>SENSE SCREENING:</b>
Sight Examination (Flash Cards): Comments .....
Smell Examination: Comments .....

<b>PREVIOUS SECURITY EXPERIENCE:</b>	<b>HEALTH:</b>
<b>GENERAL Demeanour/APPEARANCE:</b>	<b>PROOF OF I.D.: See List attached:</b> Item seen (delete which are not applicable) Driving Licence, Passport, Birth Certificate Seen by .....

**Driving License Check:**

Driving License Number .....

National Insurance Number.....

Post Code on Driving License.....

**ANY OTHER REMARKS:**

**SUITABLE/NOT SUITABLE (DELETE WHICH IS NOT APPLICABLE)**

POSITION OFFERED	YES	NO	
REGRET BUT KEEP ON FILE	YES	NO	
REGRET	YES	NO	
POSITION OFFERED (CIRCLE WHICH IS APPLICABLE)	CASUAL	TEMPORARY	PERMANENT
<b>TARGET DATE:</b>	<b>LOCATION:</b>		
<b>PAY RATE</b> £	<b>NUMBER OF DAYS PER WEEK:</b>		

<b>INTERVIEWER'S NAME:</b>	<b>INTERVIEW'S SIGNATURE:</b>	<b>DATE OF INTERVIEW:</b>
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# NEW START DETAILS FORM



**TO BE COMPLETED AND RETURNED WITH ACCEPTANCE OFFER.**

**The following information will be treated in the strictest confidence.**

## PERSONAL

(Please complete this section in BLOCK CAPITALS)

Surname:		First Name(s):	
Address:			
Email:		Postcode:	
Contact Tel. No:		Date of Birth:	
National Insurance No:			

### Bank account details of where wages/ salary to be paid:

Name of Bank:	
Branch:	
Sort Code:	
Account No:	
Account Name:	

You must get consent from your next of kin to share their information with us. Do you have consent? YES  No

### Next Of Kin Details:

Surname:		First Name(s):		
Contact Tel. No:		Relationship:		
Address:				
			Postcode:	

### DECLARATION

I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable to summary dismissal.

I understand these details will be held in confidence by the Company, for the purposes of ongoing personnel administration and payroll administration in compliance with GDPR 2018. I undertake to notify the Company immediately of any changes to the above details.

Signature:		Date:	
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**Declaration**

Please read this carefully before signing this application

**Declarations:**

I understand that employment with this Company is subject to satisfactory references and security screening in accordance with BS7858

I undertake to co-operate with the Company in providing any additional information required to meet this criteria.

*Please tick box as appropriate:*

- I give consent for the Company to contact my current employer for an employment reference.
- I do not give consent for the Company to contact my current employer for an employment reference and understand that I will be contacted prior to any request for references being forwarded to my current employer.
- I authorise the Company to approach previous employers, school/colleges, character referees or Government Agencies to verify that the information I have provided is correct.
- I 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 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.

**General Data Protection Regulation (GDPR) 2018:**

I understand that some of the information I have provided in this application will be held on a computer and some will be held in manual records. I consent to the Company's reasonable processing of any sensitive personal information obtained for the purpose of establishing my medical condition and future fitness to perform my duties. I accept that I may be required to undergo a medical examination to be given to the Company.

**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 and Barring check. However, having a criminal record does not necessarily bar you from employment. For more information ask a member of the HR team for a copy of the Company policy statement regarding Ex-Offenders. By signing this form you agree to this process.

**Screening:**

Any conditional offer of employment is subject to satisfactory screening to BS 7858 and that the applicant consents to being screened and will provide information as required. I hereby certify that, to the best of my knowledge, the details I have given in this application form are complete and correct. I understand that any documents produced as evidence of identity and proof of residence may be examined using an Ultra Violet scanner or other methods to deter identify theft and fraud. Any suspect documents will be reported to the relevant authority.

Candidates signature	
PRINT NAME:	DATE:
Employers signature	
Date	Vacancy
Comments	

# PRE – EMPLOYMENT MEDICAL

## QUESTIONNAIRE



**Full Name:**

**Address:**

**Contact No:**

**We will not  
contact your**

**doctor without your prior written consent.**

1. How many days' absence have you had from work in the last three years?	<b>days</b>
2. Are you currently on medication (excluding contraceptives)?  If YES, please give further details.	YES/NO
3. Have you spent time in hospital in the last three years?  If so, why?	YES/NO
4. Do you suffer from any injury, illness, medical condition or allergy that might affect your ability to perform your duties?  If YES, please give further details.	YES/NO
5. Do you consider yourself to have a disability?  If YES, please give further details.	YES/NO

### Data Protection Notice:

The Company requires certain information prior to you commencing employment, to ensure you will be able to perform the requirements of the job and give reliable service, and to ensure compliance with relevant Health and Safety regulations.

The information is also required in order to establish whether any reasonable adjustments may need to be made to assist you in performing your duties, in accordance with the Disability Discrimination Act 1995.

The information you provide will be treated in the strictest confidence, and used only for the purposes detailed above in compliance with the General Data Protection Regulations (GDPR) 2018. Our Privacy Policy and Statements are available on request.

**I consent to Aspro Security Services collecting and storing this information in accordance with GDPR 2018 YES  No**

Signature:

Date:

**Employee's personal details**

Last name or family name

First name(s)

Are you male or female?

 Male  FemaleDate of birth *eg dd mm yyyy*     

Home address

Address line 1

Address line 2

Address line 3

Address line 4

Postcode  
(if your address is in the UK)

National Insurance number

       Employment start date  
*eg dd mm yyyy*     **Employee statement**

You need to select only **one** of the following statements **A, B or C.**

- A** - This is my first job since last 6 April and I have not been receiving taxable Jobseeker's Allowance, Employment and Support Allowance, taxable Incapacity Benefit, State or Occupational Pension.
- B** - This is now my only job but since last 6 April I have had another job, or received taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit. I do not receive a State or Occupational Pension.
- C** - As well as my new job, I have another job or receive a State or Occupational Pension.

I have a Student Loan which is not fully repaid and I left a course of UK higher education before last 6 April and I received my first Student Loan instalment on or after 1 September 1998.

 No  Yes

Select 'No' if you are repaying your Student Loan direct to the Student Loans Company by agreed monthly payments.

Please print your name or sign here after you have printed the form.

Full name

Date *eg dd mm yyyy*     

Starter checklist 18042013 v1.2

Name: \_\_\_\_\_

Employee ID No.: \_\_\_\_\_

Home Address: \_\_\_\_\_



<u>Qty</u>	<u>Item #</u>	<u>Name</u>	<u>Price</u>	<u>Total</u>
	No Charge	MERCURY Hi-Viz Padded Coat (STATIC SITES ONLY)	£0.00	
		NAVY Jacket Soft shell	£24.95 each	
	No Charge	Hi-Viz Vest (STATIC SITES ONLY)	£0.00	
		NATO Deluxe V-Neck Jumper with Epaulettes	£15.95 each	
		Ocean Safety Shoe(STATIC SITES ONLY)	£14.95 each	
		ATLANTIC Safety Boot (STATIC SITES ONLY)	£13.95 each	
		PILOT Shirt – Long Sleeve or short 14” to 18.5”	£5.95 each	
		PILOT Shirt – Short Sleeve or long 19” to 19.5”	£6.95 each	
		PILOT Shirt – Short Sleeve or long 20” to 22”	£8.95 each	
		Plain Epaulettes - Pair	£5.00each	
		Business Trousers 30” to 38”	£8.95each	
		Business Trousers 40” to 46”	£9.95 each	
		Business Trousers 48” to 56”	£13.95 each	
		Tie Plain Navy	£2.50 each	
		Embroidery of Aspro logo	£1.00 per each item	
ONE	DEL	Delivery Charge	£7.95/order	7.95

**Acceptance of Debt and Authority to Deduct**

*Aspro Security Services Ltd agree to purchase the above uniform on behalf of..... the employee. The cost will be £ ....., and it is the employee's responsibility to repay the Company in agreed amounts over ONE – TWO – or THREE Month period. (Please tick number of months)*

I agree the following:-

1. You may deduct the sum of £ . from my wages due on \_\_\_\_\_.
2. If I should leave your employment for whatever reason (including breach of contract you), I agree that the whole of the outstanding balance will be due immediately and all or any part of the money due to me at the end of my employment may be withheld and applied in reduction of that debt.

**Signed:** ..... **Dated:**.....

**Witnessed:** .....

Name: \_\_\_\_\_

Employee ID No.: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

**Please Circle required size as appropriate**

**Navy Trousers** : 28 30 32 34 36 38 40 42 44 46 48 50 52 54 56 58

Leg: Short / Regular / Long

Long Sleeve Shirt: 14.5 15.0 15.5 16.0 16.5 17.0 17.5 18.0 18.5 19.0  
19.5 20.0 21.0 22.0

Short Sleeve Shirt: 14.5 15.0 15.5 16.0 16.5 17.0 17.5 18.0 18.5 19.0  
19.5 20.0 21.0 22.0

**Aspro Logo Jacket Navy Soft shell:** S M L XL 2XL 3XL

Clip on Tie YES / NO

Epaulettes (Pairs) YES / NO

Acrylic Navy Sweater: S M L XL 2XL 3XL

**Safety Boots/Shoe** (no half sizes).....

**High Vis Yellow Anorak:** S M L XL 2XL 3XL

**High Vis Vest Yellow:** S M L XL 2XL 3XL



:

*It is anticipated that your average weekly hours of work, excluding meal and rest breaks, may exceed 48 hours. Your signature below signifies your agreement to work more than 48 hours when required. You may revoke this agreement by giving three months' written notice.*

I hereby agree to work more than an average of 48 hours in any week for the Employer.

*In the event that I wish to withdraw from this agreement I undertake to give three months' written notice to that effect.*

**Signed by the employee:** .....

**Date:** .....