

Reference	GCS SF 2A
Version	3.0
Issue Date	16/10/2014
Approved	MD

Application Form

Golden Crown Cleaning



Golden Crown Cleaning

Confidential:

Please answer all questions. Write 'No' or 'N/A' if a question does not apply to you. Please write in **black** ink or ball point pen, and in **BLOCK CAPITALS**.

Application for:

How did you hear about us?

Personal Details

Surname: Mr / Mrs / Miss / Ms		Forenames	
Maiden / Former Names			

Present Address			
	Post Code		

How long have you lived at your present address?		Years		Months
a. House / Flat	(Please circle present state)			
b. Owner / Renting / Living with Parents / Lodging				

Home Tel No.		Mobile Tel No.	
Email Address			

If less than 3 years at your present address, state your previous address (es) including post codes and dates from and to.

Address		Dates	
Address		Dates	

Next of Kin Details

Name		Relationship	
Address		Their telephone number at work	
Home Tel No.		Mobile Tel No.	

Transport / Vehicle

Do you have a full, clean, current UK Driving Licence?	Yes / No	Do you own a motor vehicle or motor cycle?	Yes / No
--	----------	--	----------

Reference	GCS SF 2A
Version	3.0
Issue Date	16/10/2014
Approved	MD

Application Form

Golden Crown Cleaning

Education and Qualifications: (State name and address of last school / college attended).

Secondary School / College or University Attended	Dates From, To	Exams Taken, Qualifications Gained

National Insurance Number	
---------------------------	--

First Aid / Fire Fighting Certificates:	
Foreign Languages:	

Personal History:

Answer the questions below with Yes or No, if the answer is Yes, please explain why:

	Yes	No	Comment
Have you ever been dismissed from any previous employment?			
Have you ever been charged with any criminal offence in the last five years			
Have you ever been bankrupted?			
Do you know anyone who works/ worked with Golden Crown Cleaning?			

Reference	GCS SF 2A
Version	3.0
Issue Date	16/10/2014
Approved	MD

Application Form

Golden Crown Cleaning

Employment History:

Starting with your last or present employer, give details of your employment history, with FULL Postal Address, for the last five years, or since you left full time education. Include periods of self-employment and military service. Please state any periods of unemployment that you did not register with the Department of Unemployment as "Not registered / unemployed" and give full details of what you were doing. If self-employed, you must give name, address and telephone number of your accountant. Please use additional paper if required.

May we approach your previous Employer/s YES / NO

Company Name		Position Held		Dates (Month / Year)	
Address				From	To
Post Code		Reporting To			
Telephone No.		Basic Wage			
Reason for Leaving					

Company Name		Position Held		Dates (Month / Year)	
Address				From	To
Post Code		Reporting To			
Telephone No.		Basic Wage			
Reason for Leaving					

Company Name		Position Held		Dates (Month / Year)	
Address				From	To
Post Code		Reporting To			
Telephone No.		Basic Wage			
Reason for Leaving					

Personal References

Give the names and addresses of two people who must be of a status not less than householder, who have known you well for at least two years, within the last five years and who will give us a written reference. They should not be either relatives of yours, or related to each other.

Name		Name	
Address		Address	
Post Code		Post Code	
Telephone No.		Telephone No.	
Occupation		Occupation	
Length known		Length known	

Reference	GCS SF 2A
Version	3.0
Issue Date	16/10/2014
Approved	MD

Application Form

Golden Crown Cleaning

Additional Vetting Information

Please use the space below to tell us anything else you think we may need to know in regards to your Employment History. Continues on next page

DECLARATION

I understand the information given in form is subjected to satisfactory references and security screening in accordance with British Standards 7858:2012.

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

I authorise the Company and/or its nominated agent to approach previous contractors / employers, schools/colleges, character references 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 that some of the information I have provided in this application will be held on a computer and some or all will be held in manual records.

I hereby certify that, to the best of my knowledge, the details I have given in the application form are complete and correct.

I understand that any false statement or omission to the Company or its representatives may render me liable to dismissal without notice.

Print:		Date:	
--------	--	-------	--

Signature:	
------------	--