

Name:

**Applicant No:** 

Date:

# Industrial APPLICATION FORM

Senior Salmon is committed to supporting all their workers, protecting them from any form of exploitation and operating in accordance with UK legislation.

As part of this commitment we inform all new recruits that it is against UK law to ask workers to pay anything in order to gain work in the UK. As of April 2009 this also extends to paying money to people outside of the UK to gain work in the UK. Senior Salmon does not utilise or associate with companies in or outside the UK who charge jobseekers to help gain work placements.

For this reason we would ask workers who have been asked to pay any money to any individual, company or agency to enable them to find work with Senior Salmon, to inform us below or if you prefer you can inform Senior Salmon directly by calling our Workers Support Team on 01623 85 75 85. Please supply full details of any such payments and who you have paid monies to and leave your contact information.

□ I hereby confirm I have not paid any monies to Senior Salmon or any company associated to Senior Salmon to gain work placements in the UK and agree to inform Senior Salmon should I be approached by any person in the future asking for similar requests. I understand I may have to pay UK government agencies such as the Home Office to gain a workers permit in the UK which I am required to pay a fee for, Senior Salmon may apply for this on my behalf and request the required fee.

Signed	Print Name
Dated	_
I have been charged to gain work in the UK belo	w are all the detail of the charge and the person I have paid:
Name of person I paid :	
Name of agency I paid :	
Date paid :	
Address of person or agency I paid :	
	erson or agency I paid :
I hereby give Senior Salmon permission to conta	act the above to investigate on my behalf.
Signed	_Print Name
Dated	

Personal Details MANDATORY, PL	EASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS
Surname	Title
Forenames	
Permanent address	
	Postcode
Telephone (home):	(mobile):
Email address: Your Payslip will be emailed to this address.	
Gender:	Date of Birth:
National Insurance Number:	
Next of Kin:	
Contact Name:	Relationship:
Contact Address:	
	Contact No:
Do you hold a full current UK driving licence?	YES NO
Give details of any endorsements:	
What transport do you have access to? car m	otorcycle bicycle public transport other
Are you a Student? YES NO	
Nationality (this information is required by The Emple	pyment Agencies Act):
To be completed by non-British and non—EEA	nationals only
Date of entry into the UK	
Do you require a work permit? YES NO	
If yes, what type and expiry date:	
Panking Dotaile	
Banking Details	
	_ Account No:
Sort Code:	_ Building Society Reference No:
Is the account in your name? YES NO	
Pay Type: PAYE Third Party Ltd Company	
Signature:	_ Date:

Work Requirements							
What work are you willing to	do?	Any	]				
Please indicate days and hours that would suit you best: (Please tick)							
MON TUES	WED THUF	RS FRI S	SAT SU	N			
DAYS	EVENINGS	NIGHTS	ROTATING SHI	FTS			
Other information relevant to							
Qualifications & Experi	lence						
<b>Professional Qualification</b>	s						
Name of Professional Body	Membership Grade	Was Membership gained	by examination	Date			
Further/Secondary Educat				-			
Name of School/College	Subject	Qualification (GCE, CSE, GCS	E etc.) Grade	Date			

Employment History						
Previous Employer						
Name of Previous Employers	Position Held	То	From	Salary/Rate of Pay	Reason For Leaving	

## **Recent Assignments**

Agency	Client	Contact	Job Type	Pay Rate

Criminal Record and Security Checks					
This information will be used to identify appropriate opportunities for you and NOT as a short listing tool in the recruitment process					
Do you hold a Disclosure and Barring Service or overseas police check carried out within the last 3 years? If yes, please give details Yes No					
Have you ever been convicted of a criminal offence which is not spent under the Rehabilitation of Offenders Act 1974? If yes, please give details Yes No					
You may be offered an opportunity to work within an environment or establishment where you may come into contact with children or other vulnerable groups, or your profession/occupation may fall within certain excepted categories. Where this is likely to apply, the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 requires us to ask you for additional information.					
A criminal record check from the Disclosure and Barring Service formally the Criminal Records Bureau may be required where this type of work is sought.					
Do you have any previous convictions, whether or not they are "spent" within the Act, including any cautions, reprimands, final warnings, bind-overs or any convictions from overseas? If yes, please give details Yes No					
Do you hold any form of current security clearance?					
Date granted Expiry date					
Level of clearance Place of work when granted					
I confirm that the information I provided on this form and within my CV, if applicable, is both truthful and accurate. I have omitted no facts that could affect my future work placement. I understand that any engagement entered into is subject to documentary evidence of my right to work in the UK, verification of any professional qualifications and, in the case of temporary assignments, subject to satisfactory references. I understand that the Data contained in this document will be used in accordance with the Agreements and Privacy Notice of the Agency.					
I will inform Senior Salmon immediately of any circumstances that may affect my work, such as changes to health, personal details, subsequent pending prosecutions or convictions, which may arise whilst I am registered for permanent or temporary work. I understand that Senior Salmon has the right to request a Disclosure and Barring Service check where they consider it necessary and that any details from this, or any other police checks provided, may be forwarded to a potential employer.					
Signed Print name Date					
48 Hour Waiver					
The Working Time regulations 1998 ('the regulations') require the Company to limit your average weekly working time to 48 hours unless you agree with the company that the limit shall not apply to you.					
The Company wishes to have an agreement with you. It proposes an agreement (which shall apply until terminated by notice) on the basis that:					
1. the 48 hour limit on average weekly working time will not apply to you;					
2. you may terminate the agreement (so that the 48 hour time limit would apply to you) by giving the person at the Company to whom you usually report 3 month's written notice					
Under the Regulations, the Company must keep records relating to your working time. This is the case whether or not you reach an agreement with the Company about waiving working time limits.					
If you accept the Company's proposal, please tick and sign below. This document will then be a record of agreement between you and the Company.					
I agree I disagree					
Signed Date:					
Print Name					

### **Data Protection & Declaration**

The Company is a recruitment business which provides work-finding services to its clients and workseekers/candidates. In order for us to perform our contract with you, the company must process personal data so that it can provide these services – in doing so, the company acts as a data controller.

We may use the Personal Information we collect for the following purposes:

- In order to provide you with temporary and permanent recruitment, work finding and related services such as administration, payroll and employment
- In order to fulfil a contract with you
- To comply with legal or regulatory requirements
- To protect the legitimate interests of the company or third parties

We may use your Personal Information to pass on to clients, employers and payroll providers we contract with to provide you with work-finding services, email notifications and other communications by mail, telephone, SMS on the basis that such use is necessary for the purposes of the legitimate interests pursued by us, or in order for us to perform our contract with you. You may be contacted directly by these companies for the purpose of work-finding services, employment or payroll services.

We do not share Personal Information with third parties unrelated to the recruitment/work-finding services, employment or payroll services.

Full details of our Data Protection Notice are available publically on our company website.

#### Declaration

I understand that my details will remain on file to be considered for any current or future positions. I will inform the company if I wish this to change.

I declare that I have answered the questions honestly and fully. I realised that any false or incomplete statement on my part will render me liable to my registration or temporary work being withdrawn. I acknowledge my personal data will be used as outlined above and in accordance with the companies full Data Protection Notice.

Signed	Print name	Date
Notes		

## Referees

Please give the name of your present employer and the next most recent employer. College/School leavers should give the name of lecturers/teachers as appropriate. If this is not possible, please give names of persons best able to write a reference in support of your application. This must not be a friend, relative or co-worker.					
I understand that Senior Salmon will contact my previous employers					
Workers Signature		Print name _		Dat	e
Referee Details					
Company	Name:		Email Addres	S	
Address:					
Postcode:					
Reference request form					
EXPLICIT CONSENT FOR .			<b>TO</b> I	RELEASE INFOR	RMATION
I hereby authorise my current / p employment with them.	prior employe	er to release personal i	nformation re	lating to my previo	us
I understand that any information that it will be viewed only by the					
Workers Signature		Print name		Date	
Employed as:		Dates of Empl	oyment: Fro	m: To: _	
Reasons for leaving:					
Would you re-employ? Yes	No If	no, please state the re	ason:		
Has the aplicant been subject to	o any disciplir	nary action? Yes	No		
Do you know of any reason why we should not offer employment in a position of trust or responsibility?					
Please circle below your genuine opinion on how you would assess this person for the following					
Work Performance	Excellent	Very Good	Good	Satisfactory	Poor
Attendance	Excellent	Very Good	Good	Satisfactory	Poor
Timekeeping	Excellent	Very Good	Good	Satisfactory	Poor
Reliability	Excellent	Very Good	Good	Satisfactory	Poor
Honest & Integrity	Excellent	Very Good	Good	Satisfactory	Poor
Ability to work with others	Excellent	Very Good	Good	Satisfactory	Poor
General Conduct	Excellent	Very Good	Good	Satisfactory	Poor
Signed				Company Star	np Here
Print name		Position			
Date		-			