



DSG Close Protection Ltd - Application Form
Unit 7A Briarlands Office Park, Rudgeway, Bristol, BS35 3QH

Please read this form carefully and answer all the applicable questions honestly and truthfully. If you fail to do so it could affect your employment with DSG Close Protection Ltd.

Position Applied For		Location	
Title		Home Phone	
Name		Mobile	
Address		Email	
Postcode		DOB	
		National Insurance No	
Emergency Contact Details			
Name		Number	
Relationship		Mobile Number	
Eligibility to Work in the UK			
Nationality		Do you require a Visa?	Yes No
Type of Passport		Type of Visa	
SIA Licence Details			
Sector		Licence Number and Expiry	
Convictions			
Have you been fined/convicted of a Criminal Offence in the last 10 years? Please include any motoring offences and pending actions.	Yes No	Investigated	Cautioned
	Please provide further information further details subject to the provision of the Rehabilitation of Offender Act 1974		
Detail any bankruptcy proceedings and CCI's (County Court Judgments)			
Do you have a full UK Driving Licence?	Yes No	Do you have your own transport?	Yes No
Bank Details			
Name of account Holder		Sort Code	
Bank Name		Account Number	
Credit Reference Search – in accordance with BS 7858:2006			
How long have you lived at your current address?			
Is less than five years please detail your additional address history up to 5 years			
Address	Address	Address	Address
Postcode	Postcode	Postcode	Postcode
Resident from to	Resident from to	Resident from to	Resident from to



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Self Employment History						
Were you self employed in the past 10 years? Yes No If no, go to Service Record						
Self Employment – if you were self employed during the past 10 years please name two trade referees that you have traded with, or your Solicitor or Accountant details.						
Your company/trading name						
Trade Reference One		Name: Address: Postcode: Tel Number:		Trade Reference Two		Name: Address: Postcode: Tel Number:
Service Record						
Have you served during the past 10 years? Yes No If no, go to Education History						
Royal Navy	Army	RAF	Merchant Navy	Police	Fire Service	Other
Dates:	Dates:	Dates:	Dates:	Dates:	Dates:	Dates:
Please note you will need to provide your discharge papers as part of your vetting/reference checking						
Education History – please provide all contact details for the School/College/University for the past 10 years only						
Name of School/College/Uni		Contact Details		Dates	Subjects Studied	
Address		Contact Name		To		
Postcode		Tel Number		From		
Address		Contact Name		To		
Postcode		Tel Number		From		
Address		Contact Name		To		
Postcode		Tel Number		From		
Personal References						
Please give the names, addresses and contact numbers for three people that are willing to give you a personal reference. They must have known you for a minimum of two years, must not be related to you, cannot reside at the same address as you and not be a previous employer.						
Name		Address		Telephone and Email	How long they have been known to you	
		Postcode		Tel: Email Address:		
		Postcode		Tel: Email Address:		
		Postcode		Tel: Email Address:		



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Employment History for the last 10 years			
You will be Security screened in accordance with BS 7858, which requires that we verify all employment history, including any education, unemployment and self employment for the past 10 years. You must fill in ALL fields with all employment and unemployment history. You must also supply the names, addresses and contact numbers for all previous employers.			
Employer (most recent first)	Dates	Position and brief description of work	Reason for leaving
Name: Address: Postcode: Tel No:	From: To:	Job Title: Duties:	
Name: Address: Postcode: Tel No:	From: To:	Job Title: Duties:	
Name: Address: Postcode: Tel No:	From: To:	Job Title: Duties:	
Name: Address: Postcode: Tel No:	From: To:	Job Title: Duties:	
Name: Address: Postcode: Tel No:	From: To:	Job Title: Duties:	
Name: Address: Postcode: Tel No:	From: To:	Job Title: Duties:	
Name: Address: Postcode: Tel No:	From: To:	Job Title: Duties:	
Please use separate sheet if necessary			



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EQUAL OPPORTUNITIES - We are an equal opportunities employer. We aim to recruit staff on their suitability for the position advertised, without consideration of sex, marital status, disability or ethnic origin. To help us monitor this policy it would help us if you fill in this section.				
<i>White European</i>	<i>White Other – Please specify</i>	<i>Black European</i>	<i>Black African</i>	<i>Black Caribbean</i>
<i>Black Other – Please specify</i>	<i>Asian European</i>	<i>Asian Indian</i>	<i>Asian Chinese/Japanese</i>	<i>Asian Other – Please specify</i>
Gender:	Male		Female	
Marital Status:	Single	Married	Divorced	Separated
Are you registered Disabled?	If Yes, please provide more detail:			

CONSENT UNDER THE DATA PROTECTION ACT 1988

The information given to DSG in this form will be processed only by DSG for the purpose of considering your application for employment. If you are successful in your application, this form and the information in it will be retained in your HR file for such times as you are an employee of DSG and for up to 7 years at the end of your employment. Otherwise, this form will only be retained by DSG for so long as it is required in connection with your application.

By signing this consent you give us your express consent to retain and process all the information contained in this form and to transfer it to countries outside EU if required. Please note: As this is a digital form, if you are unable to sign it then we will use your printed name plus your email address as proof of signature.

Name: **Signed:** **Date:**

Please read this carefully before signing this application form

DECLARATION

I understand that whilst being screened any documents presented by myself as proof of identity and address may be checked using an ultra violet scanner or other method to deter identify theft and fraud.

I hereby certify that I personally completed this application form. I understand that should an offer of employment be made, my employment will be 'provisional' for 12 weeks until full screening and vetting has been carried out.

If I have made any misleading or false statements on this form, I understand that it will be cause for termination of my employment. I agree that my signature on this form gives DSG permission to make full enquiries about me from my previous employers, schools and colleges and Government Department to verify that the information I have given is correct.

I authorise DSG 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 the client if necessary.

I understand that employment with DSG is subject to satisfactory references and screening and will co-operate with DSG in providing any additional information required to meet this criteria.

I understand that some or information in this application form may be held on a computer and some or all information will be held in manual records.

I consent to Delta's reasonable processing of any sensitive 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 physical examination where requested by the Delta. Subject to the Access Medical Records Act 1988, I consent to the results of such examinations to be given to Delta.

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 understand that, to the best of my knowledge, the details I have given in this application form are complete and correct. In addition to this, there is nothing in my background which reflects adversely upon my suitability to work in the industry. Any false statement or omission to DSG may render me liable to dismissal without notice. Please note: As this is a digital form, if you are unable to sign it then we will use your printed name plus your email address as proof of signature.

Name: **Signed:** **Date:**