



RECRUITMENT APPLICATION PACK



Before you Start

Please fill the entire application with your best of knowledge and accurate relevant information required for each question. Please pay extra attention to **professional** and **character** references section. LifeForce Security will contact these individuals to get relevant feedback and these feedbacks will be used to make a final decision whether to offer you a employment or not.

Each section has it's won instructions to guide you through. You can email or call us during office hours, if you need further help.

LifeForce Security Limited is open, diverse and multi-cultured ethical company. We welcome applications from all ethnic groups regardless of the race, religion and social or physical status. Positive attitude, willingness to progress and honesty, these are qualities we thrive on.

... and lastly when you have finished the application, you send it to us by following:

- ⇒ **Email it to us:** hr@lifeforsecurity.co.uk
- ⇒ **Post it to us:** LifeForce Security Ltd, HR Dept, Royal Arsenal Gatehouse Beresford Square London SE18 6AR.

Thank you for showing your interest to work for LifeForce Security and wish you very best of luck.



Pius Ejionamhen

CEO

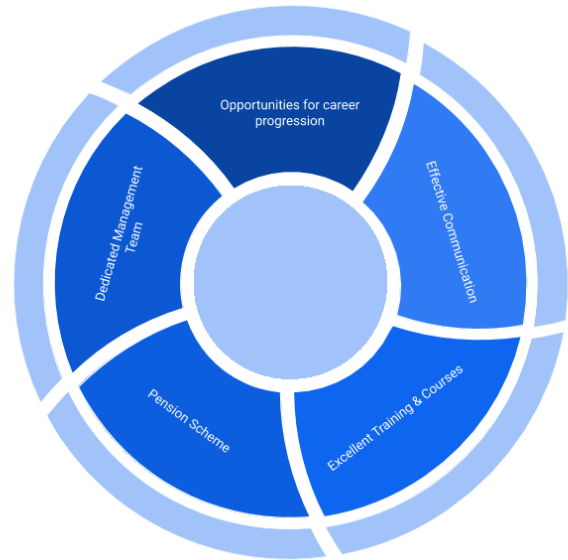
LifeForce Security Limited

About us

LifeForce Security is committed to providing reliable security services tailored to meet all our client's and workers requirements. Our organisation has an impressive synonym of pedigree over the years.

Lifeforce is well-established and highly regarded as a reliable security company with vast experience in all areas within the industry. Lifeforce Security has the experience and ability to provide high quality security.

We are committed to providing our clients with a professional security service which is tailored to meet individual requirements. We believe a secure and peaceful environment is essential for any business to trade and operate effectively. Our teams are professional, fit, well trained, and have access to the latest technology to secure all types of premises.



Facts & Figures

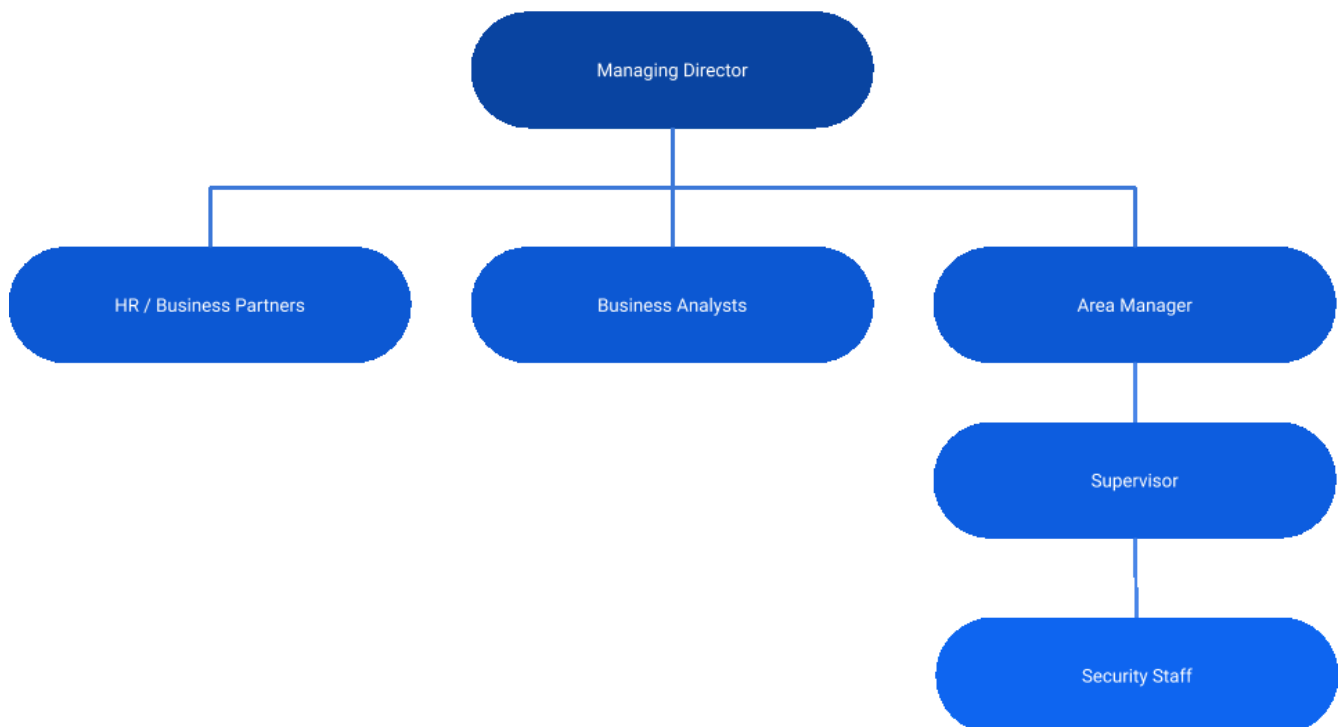
We are changing the ways people see and think of security industry, because society is forever changing, our officers continue training in the latest security and enforcement techniques and are kept up to date on the latest laws passed.

Our clients come from a wide range of sectors including government, facilities management, financial services, events and

Company Structure

In order to achieve our goal of becoming a market global leader, your contribution is essential.

There are clear reporting structures to ensure the company procedures and values are consistent throughout the company and to encourage career development.



Equal Opportunity & Other Policies

Equal opportunity in service delivery

LifeForce Security is committed to ensuring equality of access to all its services. The executive committee will take action to provide genuine equality of opportunity to counter past discrimination and to monitor the outcome. The executive committee will aim to ensure that no sector of the community shall be denied access or receive a poor service on the grounds of age, race, gender, disability, being a lesbian or gay man, marital status, ethnicity or religious belief. The executive committee will aim to ensure that all its services will be provided in line with this antidiscrimination policy. In order to promote equality of access the executive will aim to ensure the following:

- ⇒ that services are based on consultation with those who receive the services and positive steps are taken to include excluded groups in decision making.
- ⇒ that all services are flexible and responsive to the changing needs in the community.
- ⇒ that information on services is widely available and where necessary targeted to ensure maximum awareness of provisions.
- ⇒ that systems are developed to audit and monitor service delivery and consumer satisfaction.
- ⇒ that an accessible complaints procedure will be developed to ensure against discrimination in service allocation and delivery.
- ⇒ that positive action programmes will be developed to target the needs usually excluded groups.
- ⇒ that in advertising and publicity will be presented as an organisation committed to promoting equality of access to employment and services.

Corporate Organisational Arrangement

- ⇒ All executive committee members and chairs of LifeForce Security executive sub-committee will be responsible for the overall implementation of the equal opportunities policy their respective services.
- ⇒ All staff have a duty to implement LifeForce Security Ltd.'s equal opportunities policies.

The purpose of this notice the company's policy on equal opportunities, and to Advise you that it is your statutory duty as an employee of LifeForce Security, you do not discriminate against any person.

Confidentiality

In the course of your employment with LifeForce Security, confidential information (as defined below) may be imparted to you. You should be aware that the interests and the standing of the Company and every one in the Company and goodwill which LifeForce Security enjoy with their respective customers could be seriously adversely affected, if you were to disclose such information otherwise than in the legitimate course of the Company's business. Accordingly, you shall not in the continuance of your employment by the Company or at any time after termination of such employment, directly or indirectly, make use of or disclose to any person, company, business entity or other organisation whatsoever any confidential information (as defined below) obtained by you during the course of your employment other than for the legitimate purposes of the business of LifeForce Security company.

In this clause "confidential information" means and trade secrets or other information relating to or belonging to the business of LifeForce Security company which the Company regards as confidential or in respect of which LifeForce Security Limited owes an obligation of confidentiality to a third party and which is not readily ascertainable to persons not connected with the Company, either at all or without significant expenditure of labour, skill or money.

Equal Opportunity & Other Policies (cont..)

Such information shall include without limitation information relating to business methods, procedures, operating and dealings, information relating to management systems, corporate plans, financial information and plans, technical data, technical information relating to research activities, information relating to personnel matters and employees, information relating to the marketing or sales of any product or service (including sales targets and statistics), marketing surveys and plans, market research reports, information relating to sales techniques, price lists, pricing and discount structures and other pricing information, advertising and promotional material, information relating to maturing new business opportunities, the names, addresses telephone numbers, contact names and identities of customers and potential customers and details of the requirements of such customers for any products and or services any other information not in the public domain relating to the business relationship between such customers and LifeForce Security company or to the business operations of such customers.

The obligations contained in this clause do not apply...

- ⇒ To any information which may subsequently come into the public domain other than by way of unauthorised disclosure (Whether by you or a third party);
- ⇒ To any act by you in the proper performance of the duties of your employment;
- ⇒ Where the use or disclosure of information has been properly authorised by the Company;
- ⇒ To any information which you are required to disclose by law.

Publicity

Only duly authorised employees are permitted to communicate with the media or the public concerning the business of the Company. According, unless you are properly authorised to do so, you shall not at any time during the course of your employment make any statement (whether written or oral or in any other form) to the media or the public concerning the business or affairs of or purporting to be on behalf of LifeForce Security Company, nor should you accept any invitation to do so.

Use of Computers

During the course of your employment, you may become involved in the use of computer hardware and software. Accordingly, you must comply with LifeForce Security Policies relating to the use, abuse or misuse of computers and the information technology.

Non-Competition

During the continuance of your employment by the company, you shall not engage in any other employment of any nature unless authorised in writing to do so by the Company, nor will you solely or jointly with any other person:

- ⇒ Have any interest in or act as director, officer, consultant, partner or agent for any person, company, business. Entity or other organisation which is or shall be in competition with LifeForce Security company or,
- ⇒ Have any interest in, or hold any position as director, officer, consultant, partner or agent of any company, business entity or organisation, if such interest or position impairs or might reasonably be thought by the company to impair your ability to act in the interests on the Company or requires or might reasonably defined in clause above), obtained by you during the course of your employment with LifeForce Security Ltd.

Non-Solicitation of Customers

- ⇒ In the clause, the word 'customer' shall mean any person, company, business entity or other organisation who, or which is or has been during the last 12 months of your employment a customer of, or in negotiations with, the Company in relation to the general type of business with which you have been concerned during your employment.
- ⇒ You shall not at any time during your employment or during the period of 12 months immediately following the termination of your employment, whatsoever occasioned, either on your own account or on behalf of any person, company, business entity or other organisation whatsoever, directly or indirectly, canvass or solicit or take away

Equal Opportunity & Other Policies (continued)

from the Company the business orders or custom (relating to the general type of business referred to in clause above) of any customer if:

1. You have had dealings with that customer during the last 12 Months of employment.
2. You have at any time during your employment come into the possession of confidential information concerning the relationship between the company and the customer.
3. You will not, without the written permission of the company, at any time after the termination of your employment represent yourself or permit yourself to be held out by any person, company, business, entity or other organisation as being in any way connected with or interested in LifeForce Security company.

Non-Solicitation of Staffs

You Shall not for a period of 12 months following the termination of your employment solicit or entice away or seek to entice away from LifeForce Security company any person who is and was at the date of such termination employed by LifeForce Security as a director, senior manager, sales person or staffs and who is or has been engaged wholly or partly in any particular business of LifeForce Security company with which you were directly concerned at any time during the past 12 months of your employment.

In agreeing to a foregoing undertaking, you acknowledge that the following definitions apply:

- ⇒ LifeForce Security Ltd and any company in which LifeForce Security has a direct or indirect interest of 10% or more.
- ⇒ 'Company' means not only the particular company by which you are been employed, but also each other LifeForce Security accompany company by which you shall be or shall have been employed during the period of my employment with LifeForce Security Ltd.
- ⇒ You acknowledge and agree that each provision of this undertaking is independent and severable from the remaining provisions and enforceable accordingly.

Acknowledgement of Receipt

I hereby acknowledge that I have this day received the notice in relation to the company's Equal opportunities Policy and in particular to the Sex Discrimination Act (1975) and the Race Relations Act (1976) and I agree that I will at all time during my employment with LifeForce Security and abide by the provisions of the aforementioned Acts, and in accordance with the above policies.

I have not knowingly made a false declaration in the medical questionnaire or any other from I completed and return or any other documentation I supplied to the company in connection with my TUPE transfer.

Signature

Date

Full Name

Rehabilitation of Offenders Act 1974

The following is an extract from Rehabilitation of Offenders Act 1974 to explain the term “unspent convictions”. Please ensure you read through this carefully and that you are aware of its meanings.

What’s the Act?

The Rehabilitation of Offenders Act 1974 was introduced to enable criminal convictions to be “spent” or forgotten after a period of Rehabilitation. After this period, with some exceptions an offender will not normally be obliged to mention the conviction when applying for a job, obtaining insurance, or when involved in other criminal legal proceedings.

How long is the Rehabilitation period?

The period of rehabilitation will depend on the sentence given, not the actual time served in custody.

Sentence Terms		Age 17 or Over	Age under 17
01	2½ Years or Over	Never	Never
02	6 Months to 2 ½ Years	10 Years	5 Years
03	Less than 6 Months	7 Years	3½ Years
04	Fine or Community Service Order	5 Years	2½ Years
05	Absolute Discharge	6 Months	6 Months
06	Youth Custody (Under 21)	7 Years	7 Years
07	Detention (Under 21)	3 Years	3 Years
08	Probation, conditional discharge or binding over	1 Year that the order Expires	N/A
09	Attendance Centre Order	1 Year after the order Expires	N/A
10	Hospital Order	5 Years or 2 Years after the Order expires, whichever is longer	N/A

How does the Act Affect Me?

If you have been awarded any sentence shown and the period of rehabilitation has been completed your sentence is regarded as “spent” and need not be declared. If it has not been “spent” then it must be included on your application form.

Please now sign the declaration to confirm you have read the rehabilitation of Offender Act 1974 summary above.

Signature

Date

Full Name

Application Guidance & Notes

Information is gathered to facilitate security screening in accordance with BS 7858, in order to determine whether individuals are suitable to be employed in a security environment. It is important that you provide all requested information as accurately as possible.

Why is important to complete the application form?

As you are aware, in the security Industry, we must vet everyone for a period of at least ten years. This means we have to check and reference you by contacting all your employers and educational institutions. Your activities and whereabouts must be verified on a monthly basis in order to comply with the security Industry Authority Regulations on screening.

The ways you can help us complete your screening more quickly and to the required standard?

When filling the application form, under the heading Employment History and formal Education:

- ⇒ Please ensure that you:
 - ◆ Complete the information in date order beginning starting with the last job or educational institution – give the month and the year you were employed or studying.
 - ◆ Provide full names, addresses, post codes and telephone numbers of your employers and college and schools
 - ◆ Please give the name of the person you were reporting to and all the courses you have attended.
- ⇒ If you have any unemployed and you were signing on at an unemployment office or a Jobcentre or you were claiming
- ⇒ If you were self-employed, give full details of the following Persons: Your Solicitor, accountant, subcontractor or clients
- ⇒ If you were not in the country travelled abroad. Supply us with your overseas contacts (or names of persons) who can confirm your activities and whereabouts or any other document to support this period including passport entries.

Who can act as your personal referees?

Please arrange with two people who are willing to supply character references for you that they are willing to be contacted by LifeForce Security. They must be individual who known you closely for at least Five years and **who are not relatives** to you or LifeForce Security employees and **are not living in the same address with you**. Please provide full names, addresses, postcodes. Telephone number, occupation and number of years they known you.

What else you will need to supply for screening purposes?

We require at least two forms of official identification (One of which must be either your original birth certificate or current passport) and proof of your NI number, DBS Certificate, SIA Licence Card. We also require proof of your current home address. This can be any official documentation dated within the last 3 months with your name and address on them. E.g. utility bill and bank statements in your name. If you have been living at your current address for less than five years, you will need to provide your previous addresses to cover the remaining periods of up to five years.

If you have difficulties or required assistance, do not hesitate to contact the screening department on 0808 222 1920.

Thank you for your co-operation.

Personal Details

Confidential when completed

Thank you for completing this form. Due to the nature of the industry some searching question must be asked to ensure all employees meet the minimum screening requirement stipulated by the SIA regulations. All information provide by you will be treated in the strictest confidence but will be subject to verification. Should you require any assistance in completing this Application form please do not hesitate to contact the department on 0808 222 1920.

Please complete this form in your own handwriting in Black pen.

Position Applied For / Job Title	Job or Site Reference
----------------------------------	-----------------------

Title (Mr, Mrs, Ms, Miss, Sir, Dr etc)	First Name
Surname(s)	Previous Surnames (including maiden names)
Date of Birth	Nationality
National Insurance Number	Primary Contact Number
Daytime / Work Phone Number	Can we contact this number? YES <input type="checkbox"/> NO <input type="checkbox"/>

Current Address
Post Code

How long have live at this address? <i>If less than 5 years, please state your previous addresses including any overseas addresses:</i>

Previous Address 1

Previous Address 2

Email Address

Do you require Work Permit or Visa?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
-------------------------------------	------------------------------	-----------------------------

Have you been a resident of EU for the past 5 years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
--	------------------------------	-----------------------------

Driving & Transport

Do you hold full UK/EU Driving License?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
---	------------------------------	-----------------------------

Type of License you have	Automatic <input type="checkbox"/>	Manual <input type="checkbox"/>
--------------------------	------------------------------------	---------------------------------

Do you have access to your own transport?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
---	------------------------------	-----------------------------

Personal Details

Conviction

Have you been convicted for any offence by a Civil or Criminal Court? (including driving convictions)

YES NO

Do you have any prosecutions pending?

YES NO

Have you ever received a formal caution from the Police?

YES NO

Has any member of your family, near relatives or common Law partners ever been convicted of Civil or criminal offence?

YES NO

Have you been declared bankrupt?

YES NO

Have you outstanding county Court judgements?

YES NO

Have you ever been dismissed from employment?

YES NO

If answer to any of the above is yes, please take your time and give details of the incidents and dates in the box below (if required please use additional sheets of paper):

Employment History

Please provide full professional / employment history going back to time of leaving education, include details of any part-time work, vacation or voluntary work you have done, self-employment and unemployment. Use additional sheets if required and there must be no unexplained gaps in date.

Start Date (MM/YY)		End Date (MM/YY)	
Company Name			
Company Address			
Phone Number		Fax Number	
Email			
Job Title			
Summary of Duties			
Reason(s) for leaving			

Start Date (MM/YY)		End Date (MM/YY)	
Company Name			
Company Address			
Phone Number		Fax Number	
Email			
Job Title			
Summary of Duties			
Reason(s) for leaving			

Start Date (MM/YY)		End Date (MM/YY)	
Company Name			
Company Address			
Phone Number		Fax Number	
Email			
Job Title			
Summary of Duties			
Reason(s) for leaving			

Educational History

School / College/ Institution Name and Address	From: MM/YY	To: MM/YY	Subject / Qualification/Grade

If there are any gaps in your educational history please explain the reason(s) below:

Other Information

Working Hours

Are there any factors relevant to your ability to do this job? Yes No Which may affect your availability to work at any time, including Nights and weekends? If yes, please explain or give details in the box below:

YES NO

Health

Do you have any disability or health problem that may affect the kind Yes No of work you are applying for? If yes, please give details or explain below

YES NO

References

As part of our vetting process, it is our duty to fully comply with the requirement of BS ISO 9001–2015 Business Management System, therefore we require individual details of following:

- ⇒ **Two individuals** of who can provide Character Reference.
- ⇒ **Up to Four individuals** of who can provide Professional or Work Reference and One of which must be from your current or latest employer.
- ⇒ If you were self-employed **Two company or individuals** as Business Reference.

Character Reference (Mandatory Requirement)

Character Reference 1		Character Reference 2	
Full Name		Full Name	
Current Occupation		Current Occupation	
Home Address		Home Address	
How long have they known you?		How long have they known you?	
Contact Number		Contact Number	
Email		Email	

Professional / Work Reference (Mandatory Requirement)

Professional Reference 1		Professional Reference 2	
Full Name		Full Name	
Job Title		Job Title	
Business Name		Business Name	
Business Address		Business Address	
How long have you worked for this company?		How long have you worked for this company?	
Contact Number		Contact Number	
Email		Email	

Professional Reference 3		Professional Reference 4	
Full Name		Full Name	
Job Title		Job Title	
Business Name		Business Name	
Business Address		Business Address	
How long have you worked for this company?		How long have you worked for this company?	
Contact Number		Contact Number	
Email		Email	

Registered Unemployment Form

Part 1- Completed by the applicant

Name:		Unemployment benefit office Address
Occupation:		
Business Address:		Post Code:
Post Code:		Telephone Number:

I hereby authorise the above-mentioned unemployment Benefit officer to provide LifeForce Security Ltd
Any information they required concerning periods of registered unemployed/ sickness benefit.

Your Signature:		Date:	
National Insurance Number:			

Part 2- To be completed by the unemployment officer

Dates of registered unemployment/ sickness benefit.

From:		To:	
From:		To:	
From:		To:	
From:		To:	

Name:		PLEASE PLACE OFFICIAL STAMP HERE
Signature:		
Position/ Job Title:		
Date:		

Declaration (Please read before signing)

I Mr/Mrs _____ Freely given consent to LifeForce Security Ltd, under the Data Protection Act 2018. certify that the information I have provided in this application form to be true and correct and that any false statements may be sufficient cause to reject my application for employment, or, if employed, dismissal. In connection with my TUPE transfer.

- I understand that my appointment is subject to satisfactory screening in compliance with the British Standard (BS7858:2012) screening standards (this includes and is not exclusive of ID verification, residency, CCJ/ bankruptcy/financial checks and 5-year-old employment history checks). I authorise the company and any third party nominated by the company to perform and approach previous employers, educational institutions, personal referees and/ or government agencies to verify the information I have provided. I consent to the Company processing my personal data as defined in the DPA 2018; this may include sensitive personal data.
- I understand that am required to supply documentation to prove my identity and residence, any documentation submitted will be scanned using an identity checker and UV lighting, any documents which appear to be forged will be reported to the appropriate authority.
- I understand and agree that if so required I will make a statutory Declaration in accordance with the provisions of the 'Statutory Declaration Act 1835', in confirmation of previous employment or unemployment.
- 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 accept that I may be required to undergo a medical examination where required by the company. Subject to The Access to Medical Records Act 1988', I consent to the results of such examinations to be given to the company.
- I certify to the best of my knowledge the information I have provided is correct and true, and that any false statement or omission will automatically invalidate any contract of employment issued to me by the company

Signature

Date

Full Name

Declaration of beneficiaries Form

I hereby give notice to the Trustees of LifeForce Security Ltd pensions fund that with effect from today's date, I would ask Them to consider the beneficiary (ies) of any monies paid as a result of my death, under the provisions of the scheme, to the following:

Main beneficiary's detail	
Full Name	
Address	
Relationship to you	

Note: There's provisions below if you wish to nominate more than one beneficiary. If you are naming more than one beneficiary, please indicate the proportion that you wish to benefit each person.

Additional Beneficiaries

Full Name:	Full Name:	Full Name:
Address:	Address:	Address:
Postcode:	Postcode:	Postcode:
Contact No:	Contact No:	Contact No:
Relationship To you:	Relationship To you:	Relationship To you:
Proportion (in %):	Proportion (in %):	Proportion (in %):

I understand that this declaration of beneficiaries may only be considered as an indication to the Trustees of my wishes and their decision, in their absolute discretion, shall be final and binding. I further understand that I may give notices of a fresh declaration of beneficiaries at any time whilst I remain in full-time employment with LifeForce Security Ltd.

Working Time Regulation Statement

Regulation 4(1) of the working time regulations 1998 provide that an employee's average working time, including over-time, shall not exceed 48 hours for each 7-day period.

Please tick one box only.

I hereby agree that the provisions of Regulation 4(1) of the working Time Regulations 1998 should not apply to me. If at any time I should change my mind I will give one-month notices to my manager of this intention, after which period I understand that only an average 48 hours per week will be given to me to work.

Although am unlikely to work more than an average 48 hours a week, I wish to register my agreement To have the option to do so. This will allow me the opportunity to work additional hours when I choose. Confirmation the company will be unable to offer me additional work. I therefore agree that the provisions Of regulation 4(1) of the working time Regulations 1998 should not apply to me. If at any time I should Change my mind, I will give **one month notices** to my manager of this intention, after which period I Understand that only an average of 48 hours per week will be allocated to me to work.

I do not wish to work more done 48 hours a week. I understand that by making this declaration The Company will not be permitted to allow me to work more than 48 hours a week, and that I Will only be paid for the hours I work.

(Please note: - the Regulations provide that within the Security Industry an average of 48 hours work in a week is Calculated by taking the average number of hours worked in each week, over a 26week period, excluding holiday or sickness leave)

Signature

Date

Full Name

Medical History / Records

Please list all hospital, Operations or outpatient visits specifying cause and length of hospital treatment. Be as accurate as possible.

Applicant's Date of Birth:

Are you currently suffering from or have you had persistent illnesses connected with any of the following? Please state yes or no on each line below:

	YES	NO
A musculoskeletal condition causing impairment of function especially with regards to walking/running		
Anxiety/Depression, psychiatric or stress-related disorders		
Any physical limitation affecting lifting ability		
Any serious allergies that will affect your ability to work safely		
Asthma or shortness of breath on exertion		
Blood disorders		
Cancer		
Cardiovascular disease- Chest pains, palpitations, heart disease or circulatory disorders		
Chronic infectious diseases		
Diabetes		
Drug or alcohol dependency/abuse		
Epilepsy		
Faints, dizzy spells, or episodes of altered consciousness		
HIV/AIDS		
Impairment to vision, hearing or smell		
Multiple sclerosis		
Myalgic Encephalopathy/Chronic Fatigue Syndrome/ Post Viral Fatigue Syndrome		
Narcoleptic syndrome, sleep apnoea, and any other condition causing excessive daytime sleepiness		
Repetitive Strain Injuries or Work-Related Upper Limb Disorders		
Severe Migraine		
Tuberculosis		
Urinary/ bowel disorders		
Any other medical condition that has required alterations or adjustments by a previous employer, declared under the Disability Discrimination Act as amended by The Equality Act 2010.		

If you have answered YES to the any of the question above, please provide details on the next page

Medical History / Records (continued)

I hereby agree that the company retain the information above on the electronic systems database and, that the information be used to ensure my health and welfare; particularly when I am being scheduled for any duties, to be used by the Control Room in situations of emergency. I will inform the company if there is any change in the information above.

If you have answered YES to any of the question on previous page please provide details below:

--	--

Please state average daily tobacco consumption	
If you are taking any Medication, please give details	
Please state average daily alcohol consumption	
Number of days off sick from work in the past two years	
State which of the above medical condition was the cause	

Applicant's GP Details

GP Name	
Surgery / Practice Address (incl. postcode)	
Telephone Number	

Any information that you provide will not affect your application form, it will be kept confidential and used to assist you in ensuring your safety and welfare at work.

Signature

Date

Full Name

Equal Opportunity Monitoring

LifeForce Security Company is committed to taking positive action to fight unlawful discrimination in every respect of its work.

LifeForce Security Ltd is an equal opportunities employer. The aim of its equal opportunities policy is to ensure that no job applicant or employee receives less favourable treatment on the grounds of race, colour, ethnic or national origin, religion, gender, sexual orientation, marital status, HIV antibody status, AIDS or disability, nor should they be disadvantaged by requirement. LifeForce Security will strive to redress any imbalance that may become evident.

Please see below and tick the appropriate boxes you think is relevant to you

SEX:	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE
Ethnic Background:	<input type="checkbox"/> White <input type="checkbox"/> African Black <input type="checkbox"/> Caribbean Black <input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Chinese
Please specify in others:		
Do you consider yourself to be disable?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, please provide details		

Vetting & Screening

All this Information is gathered to facilitate security screening in accordance with BS 7858, in order to determine whether individuals are suitable to be employed in a security environment. It is important that you provide all requested information as accurately as possible.

In order to comply with the Security Industry Authority (SIA), regulations BS7499 and ISO9001 standards, please complete the following questionnaires:

Do you have SIA License? **YES** **NO** (You'll be required to show the ID card if invited for interview)

If YES, Please provide 16 Digit SIA Card Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please produce the license for authentication. (Coloured photocopies of the SIA license will be placed on your personnel file)

Do you receive any of the following training: (please tick Yes or No)? If yes, please provide certificate.

Subject / Course	YES	NO	Provider / Exam Board	Issue Date
Edexcel- Level 2 BTEC Award in Security operation				
NOCN- Level 2 A in Security Guarding				
City and Guild – Level 2 Certificate in Security Guarding				
First Aid At work				

I certify that this information I provide is true and correct to the best of my knowledge.

Signature

Date

Full Name

If you have any difficulties in completing this form, please contact office on **0808 222 1920**.

Thanks for your time.

Expenses Procedure

As part of the individual's employment, LifeForce Security incurs so many expenses on behalf of his employees. A substantial expense is the security Industry Authority (SIA) License fee, paid by the company on behalf of his employees.

In order to manage this outlay and to ensure that all potential; losses incurred by the company are minimised, all employees are asked to read and sign this document.

This document describes the reimbursement procedures governing the SIA Licence fee and authorises the company to deduct related expenses from employee's salary.

The SIA License Fee

Although the license to work in the Security Industry is granted to individuals, the company may agree to pay the license fee on behalf of employees if requested, the license has a fixed term lifespan of three years (36 Months, which is 1095 days).

If any employee leaves his/her employment within this period of three years, for any reason and excluding those listed below, the company is authorised to deduct the unexpired portion of the license fee from his/her salary. This also apply if any individual fails to complete their probationary period successfully. Formula used is **(SIA FEE / 36 MONTHS) x NO OF UNEXPIRED MONTHS**, E.g. If an employee leaves the company after 10 Months (i.e. the unexpired portion of the license fee is 26 Months) he/she will be deducted $(£210 / 36) \times 26 = £151.67$ based upon the associated costs.

Important: If it is not possible to recover the outstanding amount from the final salary, an invoice will be sent to you attention giving you 30 days to settle the invoice in full. Failure to settle the invoice, result in your details being passed to debt recovery agencies and a default notice being recorded in your credit file, which will seriously impact your ability get credit elsewhere. We strongly advise individuals to contact LifeForce Security for any outstanding debt, together we can find a reasonable solution that is suitable for both parties.

Exemptions from the reimbursement process

The Company will not seek reimbursement for the following situations:

- ⇒ Due to ill health
- ⇒ Redundancy
- ⇒ Retirement
- ⇒ Death in service

In any other situations, potentially meriting exemption from reimbursement, will be considered by LifeForce Security Ltd, on individual merit of each case.

Notification of withdrawal of license

In, any reason the SIA cancels your license, the employee will immediately notify LifeForce Security as early as possible. This also applies if the license is stolen or lost, in any case. Withdrawal of a license by the SIA, for whatever reason, will result in the unexpired portion of the fee being reclaimed by the company.

Employee Declaration

I agree with the above conditions; I agree to the deduction from my pay of any amount due to the Company from me in respect of SIA License.

Employee's Signature: Employee's Number:

Date of employment Commencing: Location:

Date of signing this agreement:

Next of Kin

Please provide two individual's contact details, which we can use to contact in case of an emergency. We encourage you to supply one contact from within your immediate family member and another from someone very close to you but does not necessarily lives at the same address as you.

Emergency Contact 1

Title:	MR/MISS/MRS/MS/DR
Full Name:	
Relationship To You:	
Day Time Number:	
Evening Number:	
Mobile Number:	
Email:	

Emergency Contact 2

Title:	MR/MISS/MRS/MS/DR
Full Name:	
Relationship To You:	
Day Time Number:	
Evening Number:	
Mobile Number:	
Email:	

Other Information

You may provide any other relevant information in the space provided below, please use additional paper if required.

General Terms & Conditions

Recruitment

About Your Data Information is gathered to facilitate security screening in accordance with BS 7858, in order to determine whether individuals are suitable to be employed in a security environment. It is important that you provide all requested information as accurately as possible

Security services in the UK is ever expanding business. LifeForce Security Limited is always looking to recruit talented individual who can offer something unique and be a public face of our great organisation.

LifeForce Security Limited also ensures that they have received appropriate guidance and training in the relevant legislation relating to the employment of ex-offenders, e.g. the Rehabilitation of Offenders Act 1974

At interview, or in a separate discussion, LifeForce Security Limited ensures that an open and measured discussion takes place on the subject of any offences or other matter that might be relevant to the position. Failure to reveal information that is directly relevant to the position sought could lead to withdrawal of an offer of employment

Training

In order to secure the continuous improvement and development of all employees, the company will provide suitable health & safety and all other training to all employees on a regular basis to ensure their competence to work safely within the industry and to ensure a competent work force. The underlying principle is that all staff and employees will be provided with equal access to training and equal opportunity for development and advancement. All employees will be given the opportunity to discuss with their line managers training and development matters and all employees will be given every opportunity to undertake training. Broadly, training will cover the following as well as ongoing improvement in trade or professional development.

Qualifying for a licence

To qualify for a licence to work in any front-line licensable activity, an Applicant must:

- ⇒ be aged 18 or over;
- ⇒ pass an identity check;
- ⇒ pass a criminal record check;
- ⇒ have the appropriate, SIA recognised, licence-linked qualification; and
- ⇒ have the right to work in the United Kingdom (UK).

To qualify for a licence to operate in a non-front-line role, such as a manager or supervisor, an individual must:

- ⇒ be aged 18 or over;
- ⇒ pass an identity check; and
- ⇒ pass a criminal record check.

ACCEPTANCE OF TERMS & CONDITIONS OF EMPLOYMENT WITH

I acknowledge, that I have read and understood all the contents in this application Form. **(All Employees)** are also advised to request for Company Employee Handbook. Where they will further understand everything that is expected of them. The contents of this Employee Handbook are binding on me as part of the Terms and Conditions of my employment with LifeForce Security Ltd.

Signature

Date

Full Name

For Official Use Only

Management Assignment

Op Manager Name..... Date He/she Join LifeForce..... Job Title.....
Zone..... Section code.....
Original start date if TUPE/New Employment.....TUPE N/Employment
Age exception certificate required if over retirement age-tick if closed
Security Badge Issued? YES NO

Salary Assignment

Annual Salary Salary grade Contracted Hours
Pay day..... Annual Holiday EntitlementHoliday Remaining.....
Company Car Yes No Cash alternative

For Completion by Payroll Dept

Payroll Number..... Cost Code NI Table:.....Contracted:.....
Tax Code/Basic..... P45 Gross..... P45 Tax.....

Banking Details (Required for payroll purposes)

Bank / Building Society Name..... Branch (not Address).....
Sort Code..... Account Number..... Branch Society (Ref, if app).....
P45/P46 received? Attached To follow

