	ON FORM	<u>– Please</u>	ensure			leted clearly			plied For	
Name				Contact Numbers 1.		National Insurance Number			r U.I.E Score	
Address				2.		Smoker Y	'es/No		Nationality	
				3.		Boots: Yes/No Size:		Driving Licence? Yes / No		
Post Code Email				Next of Kin: Name - Number -		Available Hours? (please tick)  Earlies  Lates  Days  Nights Any Hours		Own Transport? Yes / No  Are you unemployed? If so how long for? When can you start work?  Bank Name Sort Code Account Name Account No BS Roll Ref		
Today's Date Of Birth			Age							
	Company Name, Address Hours		Work you did, of work, other evant info	Start & Finish Dates	Pay Per Hour Reason Fo Leaving (Real)		son For aving	Your Managers Name		
1. Unemployed Period yrm	(Most recent fi								Approach for Reference Y/N	
2. Unemployed Period yrm									Approach for Reference Y/N	
3. Unemployed Period yrm									Approach for Reference	
4. Unemployed Period yrm									Approach for Reference Y/N	
Have you	Have y	ou Ha	ve you	Interviewers No	tes:	PLEAS	E DETA	AIL BENE	FITS YOU RECEIVE	
registered for working any othe employment agents	ork been offered worked for				Benefits £/wk	ŭ	on Day	Sign on where		
MEDICAL/HEALTH DECLARATION  In the interests of Health and Safety to myself and others, I will make my employer aware of any medical conditions or physical state that will affect my own and others Health and Safety or hygiene at work.  Signed										
Ū				Bato						
Are you present  1. ANY TYPE ( 2. ANY TYPE ( 3. BOWEL DIS	OF SKIN COMP OF ALLERGY?	LAINT?	diarrhoea,	YES/NO YES/NO	THE CONDITIONS BELOW COULD DISQUALIFY AN  EMPLOYEE FROM WORKING AS A FOOD HANDLER:  o Inflammation or discharge from ear  o Inflammation of the eyelids or covering of the eyebal  o Persistent or recurring skin conditions  o Oral or dental sepsis should be under adequate					
dysentery?)					YES/NO	<ul> <li>Oral or dental sepsis should be under adequate treatment</li> </ul>				
4 .BLACKOUTS, MIGRAINE OR FAINTING? 5. MENTAL OR NERVOUS BREAKDOWNS?					YES/NO YES/NO	<ul><li>Sores or boils</li><li>Nail biters</li></ul>				
6. HEART COM		IL/ II DOWN		YES/NO	For night workers only					
7. DISORDERS OF EYES / EARS/ NOSE/ THROAT?						Have you worked any night shifts before in the past? YES/NO				
HAVE YOU OR ANY OF YOUR RELATIVES     HAD TB OR ANY INFECTIOUS DISEASES?					YES/NO this?		rk was			
9. HAVE YOU	EVER BEEN IN	FORMED TH			YES/NO this?  How long have you been working night shifts?  YES/NO Have you ever suffered health problems directly related to			night shifts?		
10. DIABETES (	CARRIER OF S OR GLANDULA			YES/NO	working night shifts?					
11. HAVE YOU EVER BEEN DISMISSED FROM OR REI EMPLOYMENT ON HEALTH GROUNDS? 12. JAUNDICE OR ANAEMIA?				EFUSED	YES/NO YES/NO	If 'Yes' please give details				
13.ANY STAPH	IYLOCOCCAL II CAUSE FOOD F				YES/NO	If you have answered 'YES' to question 1-16, please give details:				
14.HEPATITIS	5,100L 1 00D 1	SISSINING!			YES/NO					
15. ASTHMA?					YES/NO	Are you receiving medical treatment at present? YES/NO			ent at present? YES/NO	
16. ARE YOU A NAIL BITER?					YES/NO	If 'YES' please give details				
DECLARATION	I OF GOOD FAI	TH:-								
To the best of m	y knowledge an	d beliefs this	information	given above is cany change to the	correct. I unders	tand that if i am ap	pointed	and this	information is inaccurate i am	
iiabie to distiliss	ai. i aiso underta	are to intom	monume of	any change to th	e above informa	auuii.				

DATE.....

YOUR SIGNATURE.....

## **Important Information**

Please read and provide the relevant information as required;

## 1. Equal opportunities statement

Frontline Recruitment is committed to a policy of equal opportunities for all work seekers and shall adhere to such a policy at all times and will review on an on-going basis on all aspects of recruitment to avoid unlawful or undesirable discrimination. We will treat everyone equally irrespective of sex, sexual orientation, marital status, age, disability, race, colour, ethnic or national origin, religion, political beliefs or membership or non-membership of a Trade Union and we place an obligation upon all staff to respect and act in accordance with the policy.

Frontline Recruitment shall not discriminate unlawfully when deciding which candidate/temporary worker is submitted for a vacancy or assignment, or in any terms of employment or terms of engagement for temporary workers. Frontline Recruitment will ensure that each candidate is assessed only in accordance with the candidate's merits, qualification and ability to perform the relevant duties required by the particular vacancy.

accordance with the candidate's merits, qualification and ability to pe	from the relevant duties required by the particular vacancy.
2. Criminal Convictions (Please delete clearly as appropriate)	
Do you have any unspent* criminal convictions?	Yes/No
If yes, state convictions and dates	
employment is sought in relation to positions involving working with a information given will be treated in the strictest of confidence and only offence is relevant to the post to which you are applying. Failure to a terminate an assignment if the offence is not declared but later of the confidence is not declared by the confidence is not d	Rehabilitation of Offenders Act 1974 and in those cases particularly where the children or vulnerable adults, details for all criminal convictions must be given. The ly taken into account where, in the reasonable opinion of Frontline Recruitment, the declare a conviction may require us to exclude you from our register or comes to light.
3. Permission to work in the UK If you are a National of one of the following countries you can enter a	and work in the LIK without any restrictions:
	nia, Finland, France, Germany, Greece, Hungary, Iceland, Irish Republic, Italy, Iorway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden,
Do you have immigration permission to work in the UK? (delete clearly as appropriate)	Yes/No
In line with Home Office guidance on the prevention of illegal working evidence of your right to work in the UK if you are to be engaged by	g we will need to verify and take a copy of your original ID documentation as Frontline Recruitment for temporary work
4. Health and Disability The following questions on health and disability are asked in order to service and to find out your needs in order to perform the job or posit	find out your needs in terms of reasonable adjustments to access our recruitment ion sought.
Do you have any health issues or a disability relevant to the position (please delete clearly as appropriate)	or role you seek? <b>Yes/No</b>
If yes, please specify	
If you have a disability, what are your needs in terms of reasonable a	djustments to enable you to perform the role sought?
Please specify	
If you have a disability, what are your needs in terms of reasonable a take aptitude tests etc?	adjustments in order to access this recruitment service and to attend interview, or to
Please specify	
	You are entitled to 5.6 weeks paid leave per year, pro rata if you join part way nnot be carried forward into the next year. You must notify Frontline Recruitment if
Data Protection Statement	
The information that you provide on our application forms and on any	CV given will be used by Frontline Recruitment to provide you work finding all data being included on a computerised database and consent to us transferring
We may check the information collected, with third parties or with other	er information held by us.
We may also use or pass to certain third parties information to prese by law.	nt or detect crime, to protect public funds, or in any other way permitted or required
Candidate Declaration – By Signing below I agree to the following I hereby confirm that the information given is true and correct. I considering passed onto potential employers.	ng ent to my personal data and CV being forwarded to clients. I consent to references
	uitment requires you to sign a contract for services and whilst you are onsite at a re to them. To reduce the possibility of theft companies may require to spot search cohol or drugs.
	employ me direct, I acknowledge that Frontline Recruitment will be entitled either to n of the hiring period with the Client (after which I may be employed by the Client
Signed by candidate	Name