

Temporary Registration

Please complete the form using BLOCK CAPITALS.

Date	<input type="text"/>		
First Name(s)	<input type="text"/>	Surname	<input type="text"/>
Date of Birth	<input type="text"/>	NI Number	<input type="text"/>
Address	<input type="text"/> <input type="text"/> <input type="text"/>		
Postcode	<input type="text"/>		
Email	<input type="text"/>		
Home Tel	<input type="text"/>	Mobile Tel	<input type="text"/>

Emergency contact / Next of kin

Name	<input type="text"/>	Tel	<input type="text"/>
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Are you seeking temporary work

Yes No

Are you seeking permanent work

Yes No

Do you hold a valid driving license?

Yes No

Do you have a disclosure barring certificate (DBS) dated within the current year?

Yes No

Would you be willing to complete a DBS check if required?

Yes No

Are you eligible to remain and take up employment in the UK?

Yes No

References

1. Please give the names and addresses of two recent employers. If you are unable to do this, please answer question 2 at the bottom of the page.

Reference 1	Reference 2
Name:	Name:
Job Title:	Job Title:
Organisation:	Organisation:
Address:	Address:
Contact No:	Contact No:
Email:	Email:
How is this person known to you:	How is this person known to you:

We reserve the right to contact any of your other previous employers within the last three years.

2. If you are unable to provide two recent working references, please give reasons?

I give authorization for these referees to be contacted and give permission for my details and any information to be released by the people or companies listed above.

Signed by applicant Date

BANK DETAILS FORM (only complete if you are seeking temporary employment)

Essential Information

The following information should be provided at your earliest possible convenience it is essential to enable ourselves to setup your personal / pay files on our systems.

1. Bank Details

ACCOUNT HOLDERS NAME (IN CAPITALS)

BANK / BUILDING SOCIETY NAME

ONLY NEEDS TO BE COMPLETED IF YOU HAVE A BUILDING SOCIETY SAVINGS ACCOUNT

SORT CODE

		-			-		
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ACCOUNT NUMBER

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BUILDING SOCIETY ROLL NUMBER – FOR SAVING ACCOUNTS ONLY

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2. Payment of wages into another person's account

Should you not have your own bank account and would like your wage paid into another person's account we need you to sign the declaration below stating you agree your wages can be paid into their account.

I AUTHORISE MY WAGE TO BE PAID INTO THE ABOVE ACCOUNT

Print Name:

Signed:

Date:

LTD COMPANY / PAYE

Please can you confirm if you wish to register as:

- A. PAYE
- B. Limited Company self employed

Answer =

B. If you are self-employed we will need to verify your Ltd Company status and require copies of:

- 1= Company Registration documents
- 2= Copy of your Liability Insurance
- 3= VAT Registration document if applicable
- 4= Copy of Business bank account details

I declare that all the information provided in this form is correct and that is my responsibility to inform Adkins & Cheurfi of any changes:

Signature:

Print Name:

Date:

For office use

Has the applicant provided all original and acceptable right to work documents?

Signed by consultant

Date

Health and Criminal conviction declaration

Do you have any health issues, mental health issues, disabilities or pending operations that we need to be made aware of in relation to the roles you seek?

Yes No

If yes, please specify

Criminal Convictions

Unspent criminal convictions? Yes/No

If yes, state convictions and dates

(NB Certain types of employment and professions are exempt from the Rehabilitation of Offenders Act 1974 and in those cases particularly where the employment is sought in relation to positions involving working with children or vulnerable adults, details for all criminal convictions must be given. The information given will be treated in the strictest of confidence and only considered where, in the reasonable opinion of Adkins & Cheurfi, the offence is relevant to the post to which you are applying. Failure to declare a conviction may require us to exclude you from our register or terminate an assignment if the offence is not declared but later comes to light)

In accordance with EU General Data Protection Regulation please refer to Adkins & Cheurfi Privacy Policy for more information on how and why we store data.

Declaration

Statement to be Signed by the Applicant

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered:

I agree that Adkins & Cheurfi Ltd can create and maintain computer and paper records of my personal data and that this will be processed and stored in accordance with the Data Protection Act 1998.

I agree to Adkins & Cheurfi Ltd terms and conditions of temporary employment

I confirm that all the information given by me on these forms is correct and accurate and I understand that if any of the information I have provided is later found to be false or misleading, any offer of employment may be withdrawn, or employment terminated.

Signed by applicant

Date

