

SAFE & SOUND SECURITY FORM

PLEASE PROVIDE TWO PASSPORT PHOTOGRAPHS!	Title Mr / Mrs / Miss / Ms	Surname	First Names	
	Address		Telephone (<i>Day</i>)	
			Telephone (<i>Evening</i>)	
	Postcode	Age	Telephone (<i>Mobile</i>)	
		Date of Birth	E-Mail	
Employment Status (<i>Delete as applicable</i>) Unemployed / Employed / Self Employed		National Insurance Number	Do you require a work permit?	
Nature of Employment			YES / NO	
Previous / Current Employers (<i>Last two</i>) Address		Address		
Telephone		Telephone		
Have you ever worked for Safe & Sound Before? YES / NO	If YES , please Specify:		Do you have any relatives employed by Safe & Sound ? YES / NO	
Your Height Feet	Inches	Your Weight Stones	Pounds	
Information for Uniform Sizing:	Neck size (<i>Men</i>)	Waist (<i>Men</i>)	Dress Size (<i>Women</i>)	
Marital Status (<i>Delete as applicable</i>) Single / Married / Widowed Divorced / Separated	Do you have any dependants? YES / NO	How many children?	Children's ages	
Have you been convicted of a criminal offence during the past five years? YES / NO	Have you ever been excluded from a Football League or FA Premier League ground? YES / NO	If Yes to either, please specify:		
Do you hold any of the following certificates: (<i>Please provide copies of Certificates</i>)				
F.S.Q YES / NO	N.V.Q-Event Stewarding YES / NO	First Aid YES / NO	Fire-fighting YES / NO	
Do you suffer from any illness or disability? YES / NO	If YES , please specify:			
Details of any serious operations, with year				

Please indicate with a (✓) when you will be prepared to work:
 Days: Nights: Weekends: Bank Holidays: Any:

Do you speak any foreign languages? YES / NO	If YES , please specify:
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Do you hold a full Driving Licence? YES / NO	Is it clean? YES / NO	If NO , please specify how many points:
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Referees
 Please provide the names and addresses of two people who would be prepared to provide a character reference, If requested

Name Address Telephone Occupation	Name Address Telephone Occupation
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Date Available for Employment

Equal Opportunities Employment Policy Statement
SAFE & SOUND UK LTD is committed to providing equality of opportunity in terms of employment for all people regardless of race, colour, nationality, ethnic or national origin, creed, disability, age, sex, marital status or sexual orientation.

To assist us in monitoring the effectiveness of our policies, please indicate (✓) to which of the following ethnic/racial groups you belong:

UK / Irish	Other European	Asian	Caribbean
African	Oriental	Other (Please specify):	

Next of Kin Address Postcode	Relationship			
<table style="width: 100%;"> <tr> <td style="width: 25%;">Telephone (<i>Day</i>)</td> <td style="width: 25%;">Telephone (<i>Evening</i>)</td> <td style="width: 50%;">Telephone (<i>Mobile</i>)</td> </tr> </table>	Telephone (<i>Day</i>)	Telephone (<i>Evening</i>)	Telephone (<i>Mobile</i>)	
Telephone (<i>Day</i>)	Telephone (<i>Evening</i>)	Telephone (<i>Mobile</i>)		

BANK DETAILS

Bank/Building Society Name: <input style="width: 90%;" type="text"/>	Account Number: <input style="width: 90%;" type="text"/>
Sort Code Number: <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/>	

SECURITY DIVISION

Are you interested in Site Work? YES / NO	Please give previous experience:
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Do you Hold a Door safe Licence? YES / NO	If YES , please specify Door Safe No:	How long have you held your door safe Licence:
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Are you interested in Stewarding? YES / NO	Please give previous experience:
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Please give details of any previous experience in dealing with the Public or any specialist skills that you possess

DECLARATION I certify that the information I have given on this form is correct to the best of my knowledge. I understand that any misleading statement or deliberate omission may be sufficient grounds for refusal or termination of employment with the company. I further understand that any engagement is subject to the receipt of satisfactory references, but that my present employer will not be approached without my permission until an offer of employment has been made and accepted.		
Signed	Printed Name	Date

OFFICIAL USE ONLY			
Called for Interview? YES / NO			
Interview Date and other arrangements:			
Signed	Print Name	Date	Position

INDIVIDUAL LEARNING ACCOUNT NO:

YES:

NO:

Turn Over ►

Contract For Temporary Staff
Safe & Sound UK Ltd

Temporary Workers

This statement dated ___/___/___ sets out terms and conditions of your employment with **Safe & Sound UK Ltd 1 Church Walk, Trowbridge, Wiltshire, BA14 8DX**, hereafter know as the **Agency**, which are required to be given to you under the **Employment Rights Act of 1996**.

Temporary Workers

1. These terms constitute a contract between the **Agency** and the **Temporary Worker** upon being signed by the **Temporary Worker**, and they govern each and every assignment undertaken by him/her. However, no contract exists between the **Agency** and the **Temporary Worker** between assignments.
2. No variation or alternation of these Terms shall be valid unless approved by the **Agency** in writing.
3. The **Agency** will endeavour to obtain suitable assignments for the **Temporary Worker** to work as a _____
4. The **Temporary Worker** acknowledges that there will be periods when no work is available and agrees that suitability shall be determined by the **Agency**, and that the **Agency** shall incur no liability towards the **Temporary Worker** should it fail to offer opportunities to work in the category above or in any other category.
5. The **Temporary Worker** is not obliged to accept an assignment offered by the **Agency** but if he/she does so, he/she to be bound by the rules set out below, and by any other rules of working practice applicable to the assignment in question.

Pay

The **Agency** will pay the **Temporary Worker** remuneration calculated at a minimum hourly rate of £_____ (No Less Than Stat. Min Wage At Time). The actual rate will be notified on a per assignment basis, for each hour worked during an assignment (Rounded Down To The Nearest Qrt. Hour) paid weekly in arrears.

Timesheets

1. Completed timesheets should be submitted on weekly a weekly basis, indicating the number of hours worked for each shift and signed by the authorised representative of the **Client** for the preceding week, and should arrive before _____ following the assignments.
2. It is the **Temporary Workers** responsibility to comply with the **Clients** procedure for signing/clocking on. The **Agency** accepts no responsibility where the **Temporary Worker fails** to familiarise and comply with the **Clients** procedures. The **Temporary Work's** working time shall only consist of those periods, which he/she is carrying out as part of the assignment. Travelling or break times do not count as working time.

Annual Holidays

Your Holiday Pay (Entitlement) will be included in your hourly rate. No other payment will apply.

Holiday Requests

A minimum of 2 weeks written notice should be given of the intended dates of leave to the **Agency**. (As Above, Holiday Pay Will Not Apply)

Sick Pay

The **Temporary Worker** will be eligible for Statutory Sick Pay provided that he/she meets the relevant statutory criteria.

Conduct Rules

The **Temporary Worker**, whilst not obliged to accept an assignment, undertakes to follow the Conduct rules set out below during each and every assignment undertaken. Failure to observe these rules could result in **Disciplinary Procedures** leading to termination of contract. Co-operates and accepts direction, supervision and instruction of any responsible person in the **Client's** organisation. Observes rules and regulations of the **Client's** establishment informed or may reasonably be expected to ascertain. Conform to the normal working hours of the **Client's** establishment (unless otherwise agreed). Take all reasonable steps to safeguard his/her own and others safety on the assignment and comply with the **Client's Health and Safety** policies and procedures. Carry a valid Driving Licence and/or Identity card on all assignments (where applicable). Present Driving Licence for inspection within 5 days of being requested (where applicable).

Confidentiality

- a) During the assignments, **Temporary Workers** will be expected to comply with the **Client's** rules of confidentiality at all times. Confidentiality rules apply during or after an assignment is completed, non-compliance of this rule could result in disciplinary action.
- b) All memoranda or any trade secrets of a confidential nature must be surrendered to the **Client** as requested on completion of an assignment.

Termination

The **Agency** or the **Client** may without liability instruct the temporary Worker to end the assignment at any time. If the **Temporary Worker** is unable to work on any given day whilst on an assignment they should inform the **Agency** before 9am / 2 hours min. before the start of a shift.

The **Temporary Worker** may terminate the assignment at any time by informing the **Agency** at least 2 hours before the assignment is due to commence.

The **Agency** is responsible for making all statutory deductions relating to Employee N.I. contributions and Income Tax at the rates applicable at the time.

Transport Charge

Temporary Workers who the Company arranged transport for will be charged a maximum of £_____ per day to be deducted from their wages.

Acknowledgement

I acknowledge receipt of this statement. I confirm that I have read the statement, and accept the policies and procedures relating to my assignments.

Signed by the Temporary Worker _____

Date ___/___/200__