

CANDIDATE APPLICATION FORM

INFORMATION REQUIRED

To enable us to process your application please complete the attached form and sign where required, returning this with ALL documents requested below.

PROOF OF IDENTITY – All workers are required by law to present Proof of Identity documents.

One of the following is required:- Valid Passport / Travel Document / EU ID Card or if you are unable to provide one of these, please supply the following documents – Full Birth Certificate, plus a document showing your permanent NI Number (this can be a P45 or P60, NI Card or letter from a Government Agency e.g. Jobcentre). Payslips are not acceptable. **YOU MUST BE ABLE TO ESTABLISH THE RIGHT TO WORK IN THE UK.**

TIME SHEETS

You will be issued with a timesheet on a weekly basis. This timesheet must be completed with your hours of work for that week and signed by your supervisor/line manager. Due to payroll deadline your timesheet must be received before **10.00am on Monday**. We advise that your authorised timesheet is emailed to our office on a Friday afternoon to ensure it is received on time. **If your timesheet is late, you may not be paid until the following week.** It is your responsibility to ensure your timesheet is authorised and received on time.

INSTRUCTIONS

1. Application Form

Complete this form in full and return to [The Vista Group](#) via email or post.

2. Equal Opportunities / Ethnic Origin / Identity Information

Please complete this information as required on the attached application form. This will be detached prior to the selection process and it for monitoring purposes only.

3. Access to Service / Work

Please complete this section to ensure that you are provided with any support needed and enable us to comply with Health & Safety At Work Act requirements.

Thank you for choosing The Vista Group and we take this opportunity to assure you of a quality service at all times. We wish you success in your employment role and should you have any questions, please do not hesitate to contact your line manager or Personnel Department. Many thanks for your cooperation.

REGISTRATION FORM

First Name:		Surname (Family Name):	
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Address:			

Home Tel:		Mobile Tel:	
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Email Address:	
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Date of Birth		NI Number:	
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Trade:			
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Qualifications:			
<i>(continue on separate sheet if required)</i>			

Have you taken and passed the CITB/CSCS Health & Safety Test? (Tick appropriate box)	YES	NO
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Relevant Cards held: please state your cards expiry date (Please attach photocopy of all cards)

AREAS OF EXPERTISE & PREFERRED WORK

Do you have: (Please tick)	PPE		Hard Hat		Safety Boots		Hi Vis Vest	
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Your Own Transport?	Car		Motorcycle		Bike		Public Transport	
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Criminal Convictions? If YES, state nature of conviction and dates:	
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The Vista Group are required by law to obtain references to establish your competence for the work you wish to undertake, therefore please provide details of your last two places of work:	
LAST EMPLOYERS (contact name):	PHONE NUMBER
TYPE OF JOB DONE	

1.	
2.	

BANK DETAILS:			
Sort Code:		Account Holders Name:	
Account Number:			
DECLARATION: I hereby confirm that the information given is true and accurate. I consent to my personal data being included on the Vista Group's secure computerised database system.			
Signed:		Date:	

EQUAL OPPORTUNITIES / ETHNIC ORIGIN MONITORING					
The Vista Group is an Equal Opportunities employer. In order to assist us in monitoring the effectiveness of our Equal Opportunities Policy, we would be grateful if you would complete the questions below.					
SEX		ETHNIC ORIGIN			
Male		White		Bangladeshi	
		African		Chinese	
Female		Black Caribbean		Indian	
		Black UK		Pakistani	
Transgender		Black Other		Middle Eastern	
		Eastern European		Other – please state	
					Decline to comment

SEXUAL ORIENTATION		RELIGION/BELIEFS			
Heterosexual		Atheism		Judaism	
Lesbian/Gay/Homosexual		Buddhism		Sikhism	
Bi-sexual		Christianity		Other	
Other		Hinduism			
		Islam			
Do not wish to disclose		Jainism		Do not wish to disclose	

ACCESS TO SERVICE / WORK		
The following questions are asked only in order to determine reasonable adjustments that may be necessary to enable access either to our recruitment services and/or interviews and places of work.		
Do you consider yourself to be disabled or have any health issues which may make it difficult for you to carry out functions which are essential to the role you have applied for?		Yes
If 'YES, please specify:		No
I, the undersigned confirm that the above information is correct at the time of giving it and I agree to advise the Vista Group of any changes that may affect my fitness to work.		
Signed:		Dated:



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