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| **PERSONAL DETAILS** |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Full Name:** |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Full Postal Address:** |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Postcode:** |  | | | | | | | | | | **Email Address:** | | | | |  | | | | | | | | | | |
| **Mobile Telephone:** |  | | | | | | | | | | **Home Telephone** | | | | |  | | | | | | | | | | |
| **Gender:** | **Male** | | |  | | **Female** | | |  | | **Date of Birth:** | | | | |  | | | | | | | | | | |
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| **ELIGIBILITY** |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Passport** | | **Yes** | | |  | | | **No\*** | |  | | **Permit Required:** | | | | | | | **Yes\*** |  | | | | **No** | |  |
| **\*Recruiter - Please revert to Proving Right to Work procedure and List A & List B documentation guidelines** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Are you Eligible to Work in the UK?** | | **Yes** | | |  | | | **No** | |  | | **Type of Visa / Work Permit Held (if Applicable)** | | | | | | |  | | | | | | | |
| **Under the Rehabilitation of Offenders Act 1974, you may be asked to disclose unspent convictions and/or be subject to a CRB / Vetting or other police check in advance of being considered or accepted for certain posts where such information/clearance is relevant. For expediency, you may wish to provide these details below. Applicants who are unsure of their rights under this legislation should seek advice.** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Have you been involved in any criminal proceedings?** | | | | | | | | | | | | **Yes** | |  | | | | **No** | | | | |  | | | |
| **If yes, please give details of offence:** | | | | | | | | | | | |  | | | | | | | | | | | | | | |
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| **HEALTH & SAFETY** | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you have any medical condition, or disability, which may require any special facilities or support during the recruitment process or at work?** | | | | | | | | | | | | | | | | | **Yes** | |  | | | **No** | | |  | |
| **If ‘Yes’ please give details:** | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| **Are you prepared to work unsociable hours?** | | | **Yes** | | | | | | |  | | | | | **No** | | | | | |  | | | | | |
| **Do you hold any First Aid qualifications?** | | | **Yes** | | | |  | | | **No** | | |  | | **Details:** | | | | | |  | | | | | |

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| **BANK / PAYMENT DETAILS** | (Only required if you are employed as a Temporary worker. You will be paid by BACS transfer into this account. You must be a named person on the bank account – we cannot process payments into accounts under someone else’s name) | | |
| **Bank Name:** |  | | |
| **Bank Branch:** |  | | |
| **Bank Sort Code:** |  | | |
| **Bank Account Number:** |  | | |
| **Account Holder Name:** |  | | |
| **Limited Company Name:** |  | | |
| **National Insurance Number** |  | | |
|  | | | |
| **EMERGENCY CONTACT** | Please provide the name and details of someone you would wish us to contact on your behalf in the event of an emergency, ensuring they are aware you are submitting their data to Global Highland for this purpose: | | |
| **Name:** |  | **Relationship:** |  |
| **Contact Number:** |  |
| **Contact Address:** |  | | |

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| **NEXT OF KIN** | | Please provide the name and details of your nominated Next of Kin (e.g. Partner, Spouse, Parent, Grandparent, Child over the age of 18 etc.), ensuring they are aware you are submitting their data to Global Highland for this purpose: | | | | | | | | | |
| **Name:** | |  | | | **Relationship** | |  | | | | |
| **Telephone Number:** | |  | | | **Dependants:** | |  | | | | |
| **Contact Address** | |  | | | | | | | | | |
| Global Highland is a leading Company providing services as an Employment Agency and Employment Business to those looking for permanent and temporary work, and to organisations looking to find suitable workers. Some of our Clients request sight of references and, in order to comply with current Employment Legislation, we require your permission to pass references onto a Third Party. If you **do not** wish references to be passed onto a Third Party **please tick this box**  **It is standard procedure that our Clients request references. We would appreciate if you could confirm details of 2 Referees in this section, so that we can approach them NOW on your behalf to enable us to process your application. Please note WE DO NOT, unless instructed, contact your current employer.** | | | | | | | | | | | |
| **REFEREES** | | Please note when supplying a Reference that we require references from **2 SEPARATE Previous Employers** wherever possible. Should you be unable to provide 2 references from Previous Employers, 1 Employer Reference and 1 Character Reference will be acceptable. Character References should be from someone who has known you in a professional context (Lawyer, Financial Advisor, Doctor, Lecturer etc.) preferably for a minimum of 5 years. Referees should not be a relative or friend AND should have given their permission for you to provide their data. Young Persons or School Leavers may wish to list a Teacher or Guidance Teacher in this section. Please refer to your Recruitment Specialist for guidance on why this is necessary, and whether the referees you have selected are suitable for use. | | | | | | | | | |
| **Reference Type:** | | **Employer** |  | | | **Character** | | | |  | |
| **Name:** | |  | | | | | | | | | |
| **Job Title:** | |  | | **Company:** | | | |  | | | |
| **Address & Postcode** | |  | | | | | | | | | |
| **Email:** | |  | | | | | | | | | |
| **Relationship:** | |  | | **Telephone Number:** | | | |  | | | |
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| **Reference Type:** | | **Employer** |  | | | **Character** | | | |  | |
| **Name:** | |  | | | | | | | | | |
| **Job Title:** | |  | | **Company:** | | | |  | | | |
| **Address & Postcode** | |  | | | | | | | | | |
| **Email:** | |  | | | | | | | | | |
| **Relationship:** | |  | | **Telephone Number:** | | | |  | | | |
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| **DECLARATION** | |  | | | | | | | | | |
| **I HEREBY DECLARE,** | | | | | | | | | | | |
| 1. That the information submitted to Global Highland Ltd on this form and the accompanying Curriculum Vitae (if applicable) is, to the best of my knowledge, true, accurate and complete, and contains no false information. 2. That all references supplied by me to Global Highland are bona fide references and can be followed up at any time if so required. 3. That I have made any Third Parties whose personal data is detailed on this form (ECI, NoK, Referees), aware that I am submitting their information to Global Highland for the purposes of supporting my registration for work finding services, and that all information shall be held securely under the provisions of the EU General Data Protection Act. 4. That I shall endeavour to inform Global Highland as soon as possible should any of the personal data on this form (or held within the Global Highland database) become inaccurate or out of date for any reason. | | | | | | | | | | | |
| **NOTE:** | | | | | | | | | | | |
| 1. Global Highland Ltd reserves the right to take legal action against applicants who knowingly provide false information, which causes subsequent loss to Global Highland. 2. Submission of any such false information may be sufficient cause for refusal of services, or, if already engaged as a temporary worker with a Client, your assignment may be terminated in accordance with your Terms of Engagement or Contract for Services. 3. All information provided will be treated in the strictest confidence and will be held in accordance with the relevant Data Protection legislation. Further details regarding GHL’s treatment of personal data are available via the GHL Privacy Notice. | | | | | | | | | | | |
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| **SIGNATURE:** |  | | | | | | | | **DATE:** | |  |