Event Staff Application

Black Watch Tactical Ltd

Regent Road

Salford Manchester M4 5EA Tel 0800 001 6297



S.I.A. LICENCE NUMBER															
		NVQ LEVEL 2 SPECTATOR SAFETY													
		Part time	employ	yment:	Even	ıt St	aff/ Supervisor /Res	spon	se T	eam					
CONFIDENTIAL WHEN COMPLETED															
PLEASE ANSWER ALL QUESTIONS USING BLOCK CAPITALS															
1. HOW DID YOU FIND OUT ABOUT BWT EVENT APPLICATION; LOCAL JOB CENTRE, PRESS, INTERNET, STAFF ALREADY WORKING FOR BWT? PLEASE CIRCLE CHOICE. PERSONAL INFORMATION'															
SURNAME:							FIRST NAMES;								
CURRENT ADDRESS:							TELEPHONE:								
							MOBILE NO:								
PREVIOUS							CURRENT DRIVING LICENCE NO:								
ADDRESS IF LESS THAN							CAR OWNER:				YES	NO			
3 YEARS AT ABOVE;							NATIONAL INSURANCE No								
2. BANK DETAILS (complete at interview)															
BANK ACCOUNT NUMBER SORT CODE															
NAME OF BANK NAME OF ACCOUNT HOLDER															
PLACE OF BIRTH:															
MARITAL STATUS:	N	MARRIED	PARTNE	RSHIP	SING	LE	DATE OF BIRTH:						AGE		
HEIGHT:				WEIGH	łT:				OLO F EY						
3. NEXT OF KIN															
NAME:	AME: RELATIONSHIP:														
ADDRESS		TEL No													

		O WITH A CRIMINAL, CIVIL OR MILITARY IG OFFENCES HAVE YOU ANY ALLEGED						
IF Y	ES, GIVE DETAILS:							
YES NO	-,-							
5. MEDICAL INFORMATION	IOADU ITVO							
DO YOU SUFFER FROM ANY ILLNESS OR D	IF YES PLEASE SPECIFY:							
YES NO (delete)								
6. EVENT WORK HISTORY/ YEARS/ COM	NTACT NAME/ TEL NUMBI	<u>≣R</u>						
7. EVENT	SUB-CONTRA	CTED						
Requirements	Requiremen	ts						
Black trousers, white shirt, black tie, bla black shoes/boots for inside events.		Black trousers, white shirt, black tie, black jacket, black shoes/boots for inside events.						
Outside events you will be provided witl proofs.	You will be p Vis Vest.	You will be provided with an Event jacket and or Hi Vis Vest.						
STATEMENT TO BE SIGNED BY APPLIC	ANT							
I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE, THE INFORMATION I HAVE GIVEN IS								
COMPLETE AND CORRECT AND I UNDERSTAND THAT MISREPRESENTATION OF FACTS IS GROUNDS FOR IMMEDIATE DISMISSAL AND RENDERS ME LIABLE FOR PROSECUTION.								
IF APPOINTED, I AUTHORISE THE COMPANY TO APPROACH ANY GOVERNMENT AGENCIES, FORMER EMPLOYERS, CREDIT								
	FY THE INFORMATION GIVEN A	AND WILL SUPPLY A STATUTORY DECLARATION IF						
APPLICANT'S SIGNATURE:		DATE:						