

# APPRENTICESHIP APPLICATION FORM

## THE APPLICATION PROCESS

### Stage 1 – Application Form

Please complete this application form and return it to: **Safety & Access Ltd, Dabell Avenue, Bulwell, Nottingham, NG6 8WA**

If you have any queries or difficulties in completing this application form please contact:

Sarah Cockell Tel: 0115 9794523 or 07810551491 e-mail: [scockell@safetyaccess.co.uk](mailto:scockell@safetyaccess.co.uk)

## PERSONAL DETAILS

Surname / Family Name:

First Name(s):

Date of Birth:  /  /

Gender  Male  Female  
(Please tick .;)

Is English your 1<sup>st</sup> language?  Yes  No

Address:

Post Code:

Home Tel. No:

Mobile Tel. No:

E-mail Address:

What School/College are you currently attending? Or what School/College did you last attend?

School/College Name:

Address:

From:

To:

For office use only

Date Received:

Application No.

Notes:

# APPRENTICESHIP APPLICATION

Please indicate the occupational area you wish to apply for:

## Construction

Scaffolding

Please indicate area(s) you are able to travel to

Do you drive?

Yes

No

Are you currently employed?

Yes

No

If yes please supply company details:

Name:

Full Postal  
Address:

## PERSONAL INFORMATION

Personal qualities as well as examination successes are important; please tell us about yourself below.

Interests /  
Achievements:

Work  
Experience

What eventual  
career do you  
have in mind?

## REFERENCES

We may require a reference from your current School/College.

If you have already left school, please supply the name and address of an employer / person who can be contacted for a reference.

Name:

Full Postal  
Address:

Contact  
Tel. No:

## EXAMINATIONS / QUALIFICATIONS

Please list below any examinations you have already taken, the grade you achieved OR any examinations you will take before starting your training, with predicted grades.

(Please consult your teacher or insert your mock exam results.)

### GCSEs

GCSE Subject:

(Please indicate if short course or dual award)

Predicted  
Grade

Actual Grade  
(If applicable)

Mathematics

English Language

English Literature

Science

Other: (Please List)

### Other Qualifications

e.g. GNVQ, Key Skills:

Result:

## ADDITIONAL INFORMATION

Do you hold a CRB (Criminal Records Bureau Disclosure) or overseas police check carried out within the last 3 years?

YES  NO

Have you ever been convicted of a criminal offence which is not spent under the Rehabilitation of Offenders Act 1974?

YES  NO

Do you have any previous convictions, whether or not they are "spent" within the ACT, including any cautions, reprimands, final warnings, bind-over or any convictions from overseas?

YES  NO

If Yes, please give details

# ELIGIBILITY CHECKLIST

Name \_\_\_\_\_ NI Number \_\_\_\_\_

All of the statements below, where applicable, must be completed to prove eligibility on to a funded apprenticeship. If you are unable to confirm any of the points below please discuss further with Safety & Access Ltd

DETAILS		Confirm (To be completed at start of programme)
I am / will not be attending school or FE college full time as a pupil or student from ..... (enter date leaving / left school/college)	True <input type="checkbox"/> False <input type="checkbox"/>	
I am not in full time Higher Education including vacation periods.	True <input type="checkbox"/> False <input type="checkbox"/>	
I have lived in the U.K. for a minimum of 3 years.	True <input type="checkbox"/> False <input type="checkbox"/>	
I am not an overseas national, if so I have evidence of a permanent National Insurance number or proof of eligibility	True <input type="checkbox"/> False <input type="checkbox"/>	
<b>Either</b> I am not a Graduate.	True <input type="checkbox"/> False <input type="checkbox"/>	If applicable
<b>Or</b> I am a Graduate and have participated on the New Deal Programme	True <input type="checkbox"/> False <input type="checkbox"/>	If applicable
I work 30 hours or more per week. (authorisation will be needed from LSC if less than 30 hours)	True <input type="checkbox"/> False <input type="checkbox"/>	
I am not on any Government funded schemes	True <input type="checkbox"/> False <input type="checkbox"/>	
<b>Either</b> I have not been on an Apprenticeship or Advanced Apprenticeship previously.	True <input type="checkbox"/> False <input type="checkbox"/>	If applicable
<b>Or</b> I confirm that I have previously received training on an Apprenticeship / Advanced Apprenticeship  in _____ (name of programme)  at _____ (Provider name)	True <input type="checkbox"/> False <input type="checkbox"/>	If applicable

**To be completed at sign up to programme**

I confirm that the above details are correct	
Signature _____	Date: _____
Safety & Access Ltd Representative _____	

## EMERGENCY CONTACT DETAILS

<b>1<sup>st</sup> Contact:</b>	<input type="text"/>	<b>Tel.:</b>	<b>Home:</b>	<input type="text"/>
<b>Relationship</b>	<input type="text"/>		<b>Mobile:</b>	<input type="text"/>
<b>2<sup>nd</sup> Contact</b>	<input type="text"/>	<b>Tel.:</b>	<b>Home:</b>	<input type="text"/>
<b>Relationship</b>	<input type="text"/>		<b>Mobile:</b>	<input type="text"/>

## EQUAL OPPORTUNITIES

**EQUAL OPPORTUNITIES MONITORING:** Safety & Access Ltd has an Equality of Opportunities and Diversity policy that welcomes people of all backgrounds regardless of race, ethnic origin, disability, religion, sexuality or age. Please help us monitor the effectiveness of our policy by answering the following questions.

Country of Legal Nationality:

Have you lived in the UK or EC during the whole of the last 3 years?  YES  NO (Please tick .;)

Do you have a disability or learning difficulty requiring special consideration or support?  YES  NO (Please tick .;)

To which ethnic group do you belong? (Please tick .; the appropriate box)

Asian or Asian British - Bangladeshi	<input type="checkbox"/>	Black or Black British - African	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	White - Other	<input type="checkbox"/>
Asian or Asian British - Indian	<input type="checkbox"/>	Black or Black British - Caribbean	<input type="checkbox"/>	Dual background	<input type="checkbox"/>	Any Other	<input type="checkbox"/>
Asian or Asian British - Pakistani	<input type="checkbox"/>	Black or Black British - Other Black background	<input type="checkbox"/>	White - British	<input type="checkbox"/>	I do not wish to provide this information	<input type="checkbox"/>

## How did you hear about the course you are applying for?

(Please tick .; appropriate box)

School / College	<input type="checkbox"/>	Open Day/Evening	<input type="checkbox"/>	Newspaper	<input type="checkbox"/>	Employer	<input type="checkbox"/>
Careers Advisor		Another Apprentice		Other			
If other please specify:	<input type="text"/>						

## Why have you chosen to apply to Safety & Access Ltd

## DECLARATION

I believe that the information provided is correct to the best of my knowledge.

I understand that the information provided will be used to help secure an apprenticeship with an employer.

Signature:	<input type="text"/>	Date:	<input type="text"/>
Signature of Parent/Guardian: (if under 18 years)	<input type="text"/>	Date:	<input type="text"/>