

Application Form

Please complete the form below and detail your permanent residential information as per your identification documentation. We'll start processing your application straight away.

Applicant and Permanent Residential Information

Title (as per identification documents): Mr: ☐ Mrs: ☐ Miss: ☐ Ms: ☐ Other:

Forename(s): Surname:

Are you a UK resident for tax purposes? Yes: ☐ No: ☐

Home Telephone: Mobile Telephone:

Email Address: House Name/Number:

Street/Road Name:

Town/City: Country:

Postcode: Nationality:

Date of Birth: Your NI Number:

About Your Work

Industry Sector: Job Title:

Please tick which category best describes your role:

- ☐ Clerical - Administrative/IT ☐ Clerical - Technical/Professional
- ☐ Manual (NB: this means your role involves use of hand tools more than 20% of the time)

Short description of key responsibilities (e.g. "I am responsible for designing, developing and executing test plans"):

Please list any qualifications, authorisations, experience or training requirements placed upon you by your end client, agency or professional body to undertake your role:

☐ I confirm that I have all of the above and will co-operate in any checks in relation to these as required.

Does your role require you to have regular access to vulnerable adults and/or young children?

Yes: ☐

No: ☐

(If so, please provide copy of most recent DBS check.)

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Your First Client

Please add your initial client below - you'll be able to add more later. If you'd prefer to provide details of your first client later, please miss this step out.

Is this a recruitment agency or end client?

Recruitment Agency: ☐

End Client: ☐

What is the name of your recruitment company or client?

Contact Name:

Address:

Town/City:

Country:

Postcode:

Telephone:

Email Address:

Proposed Start Date:

Proposed End Date:

Agency Rate:

Are you: Weekly Biller: ☐

Monthly Biller: ☐

Your Bank Details

We need your bank details in order to pay you. If you'd prefer to provide these details later, please miss this step out.

Bank or Building Society Name:

Branch Name:

Branch Address:

Name of Account Holder(s):

Sort Code (6 Digits):

Building Society Number (if applicable):

Swift Code:

IBAN Number:

Account Number:

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Know Your Customer Verification

For your security and convenience, we will make use of electronic identity and address verification to satisfy our commitment to compliance with UK Money Laundering legislation.

Please supply us with:

- a. A copy of the photograph page of your passport
(a clearly visible image including the MRZ number)
- b. A copy of a utility bill or bank statement
(no more than 6 months old, not a mobile phone bill)



What provides you with the Right to Work in the UK?

UK Passport: ☐ EU Passport/Identity Card: ☐

Visa: ☐ Please specify type:

Please provide electronic copies of all documentation to support your application (if Visa ensure copies of both front & back).

Applicant Signature

I confirm that I have the experience, training, qualifications and any authorisation which the Agency or End User as identified in any Assignment considers are necessary, or which are required by law or by any professional body for me to possess in order to perform the Services; and will if requested provide confirmation of the same and co-operate in any checks in relation to experience, training, qualifications and authorisations relevant to the performance of my Assignments.

Tick to Confirm: ☐

I confirm that I have no criminal convictions which would reasonably affect the decision to allow me access to the Location(s), the Agency or End User as identified in any Assignment Systems or to fulfill the Assignment.

Tick to Confirm: ☐

I declare that the information given here is accurate and that I have not wilfully withheld any information, nor falsified information that would disqualify my application.

Tick to Confirm: ☐

I have sought/will seek independent tax advice to ensure my tax planning remains appropriate to my personal circumstances.

Tick to Confirm: ☐

I consent to my personal details being held in both electronic and paper format
(in accordance with the Data Protection Act 2002).

Occasionally, when we or one of our chosen suppliers launch a new product /service that we think you would like, then we are committed to sharing this with you. Only check this box ☐ if you would prefer NOT to receive this kind of information.

Working Status Questionnaire

Q1. – Working hours test

- 1A. You are able to carry out the required work whenever you want, provided that you meet agreed deadlines.
- 1B. You can vary your working hours provided this is agreed with the client.
- 1C. You are required to work a specific number of hours or a set shift pattern.

Q2. – Direction, Supervision and Control test

- 2A. You have full autonomy and can decide how best to carry out your work.
- 2B. You are given guides or best practise, but you can use your own skill and judgement in completing your work.
- 2C. There is a supervisor or manager who can completely control you in each task and telling you how to do it.

Q3. – Responsibility of Completed Work test

- 3A. If you make a significant mistake, you will have to correct it in your own time and can't charge for this time.
- 3B. If you make a significant mistake, you will correct it, but you will charge for this time and the client will pay for it.
- 3C. You don't need to correct mistakes made.

Q4. – Line Management test

- 4A. You take no part in management of the client's staff.
- 4B. You manage junior staff and/or take part in management meetings, which are not about the work or what you are doing, for instance, staff appraisals.
- 4C. You are treated as a key employee in all aspects of your role.

Q5. – Substitution test

- 5A. If you are unable to carry out the work through illness or you want to take some time off, and the client needs the work carrying out, you could send someone else to do the work in place of you, and the client would accept this person, as long as the person was competent.
- 5B. If you are unable to carry out the work through illness or you want to take some time off, and the client needs the work carrying out, you could send someone else to do the work in place of you, and the client would accept this person, so long as the replacement is acceptable to the client.
- 5C. If you are unable to carry out the work through illness or you want to take some time off, and the client needs the work carrying out, either the client or the agency will find someone to do the work in your absence.

Q6. – Mutually of Obligation test

- 6A. There is no Mutually of Obligation (MOO) in your contract. This is where the client is not legally required to offer you additional work after the end of your contract and you as the contractor are not legally forced to accept any work being offered.
- 6B. There is a partial MOO within the contract. Under certain circumstances the client may be legally required to offer additional work past the end of the contract and/or you may be legally required to accept additional work offered.
- 6C. Full MOO in the contract. At the end of the contract the client must offer additional work and any offer of work provided must be accepted by the contractor.

Q7. – Financial Risk test

- 7A. You are covering all of your own contract expenses, which include but are not limited to work tools, training and travel.
- 7B. The client is partially covering some of these items.
- 7C. The clients is fully funding all training, expenses and payment is guaranteed.

I hereby declare that the information provided above is true and correct. I also understand that any willful dishonesty may render for refusal of this application or immediate termination of and subsequent engagement.

Print name

Signature

Date