

CONFIDENTIAL



Always with your interest at heart

This form should be returned to the Society at the under mentioned address:

51-55 Duke Street,
Barrow-in-Furness,
Cumbria.

Application for Employment

Please use block capitals throughout

PERSONAL DETAILS

Surname _____ Forenames _____ Title _____

Any Previous Surname _____ Date Changed _____

Current Address with dates: _____

Post Code _____ Telephone Number _____

Please list all addresses with all specific dates (date, month, year) within last 5 years including postcodes. Please continue on an additional sheet if necessary.

National Insurance Number _____ Place of Birth _____

Date of Birth _____

Do you have a full driving licence? YES/NO Any endorsements? YES/NO If yes please give details

Next of Kin _____ Relationship _____

Emergency contact _____ Emergency Contact Telephone Number(s) _____

Are you in good health? YES/NO

Do you have any disabilities or conditions that the Society should be aware of to ensure your health and safety within a working environment? YES/NO (If yes please give details).

Are you registered disabled YES/NO

Are there any special amenities/adaptations which would be required to enable you to attend an interview? YES/NO (If yes please give details).

AUTHORISATION & GOOD CHARACTER

Have you ever worked as an Introducer or authorised Financial Adviser within a regulated environment or as a Mortgage Adviser? Yes No

If the answer to this is 'yes' please provide details of the work undertaken including employer, length of time, experience, mandates and training received, below, for the past 10 years only. Yes No

We may need to contact the employers below covering the past 10 years. Do you have any objection. If 'yes' please give reasons on a separate sheet of paper. Yes No

Have you ever been disciplined, suspended or dismissed in connection with regulated activities? Yes No

If the answer to this is 'yes please provide details on a separate sheet of paper.

Name of Company	From (mnth & yr)	To (mnth & yr)	Position held	Reason for leaving

Have you ever been convicted by a court (civil or military) for offences (other than a motoring offence unless resulting in disqualification from driving) which are not spent convictions under the Rehabilitation of Offenders Act 1974, or have you been subject to penalties for tax evasion? Yes No

Have you ever been a defendant in any civil proceedings, or a party to any arbitration, in relation to investment business or other financial business, or the subject of any criminal proceedings? Yes No

Have you ever; had any judgement debt entered against you, made any compromise or arrangement with one or more of your creditors, ceased trading in circumstances in which one or more of your creditors did not receive full payment, had a petition for bankruptcy presented against you, been declared bankrupt, had your estate sequestered or are you currently aware of any pending proceedings for any of the above? Yes No

Have you ever been refused, or had revoked or withdrawn, any authorisation to carry out insurance, investment or banking business? Yes No

Have you ever been involved as a director, secretary or partner with a financial services business that has ceased to trade, gone into insolvency, liquidation or administration? Yes No

Have you ever been disqualified as a company director? Yes No

EMPLOYMENT

Position applied for _____

Are any of your relatives employed by this Society. YES/NO. If YES give details

Please list any skills, experience or qualifications which you feel would especially suit the job you are applying for?

EMPLOYMENT HISTORY

Please explain any gaps in employment exceeding two weeks.

A. Present/Last Employer

Employers Name & Address _____

Type of Business _____ Job Title _____

Type of work and responsibilities _____

From dd/mm/yyyy to dd/mm/yyyy Present Salary/leaving Salary
□□/□□/□□□□ □□/□□/□□□□ £_____ per _____

Reason for leaving (or wanting to leave) _____

B. PLEASE GIVE DETAILS OF YOUR PREVIOUS EMPLOYMENT, COVERING THE LAST 5 YEARS BEGINNING WITH THE MOST RECENT.

Please continue on an additional sheet if necessary.

Employer _____

Type of Business _____ Job Title _____

Address _____

Type of work _____

From dd/mm/yyyy to dd/mm/yyyy Reason for leaving
□□/□□/□□□□ □□/□□/□□□□ _____

Employer _____

Type of Business _____ Job Title _____

Address _____

Type of work _____

From dd/mm/yyyy to dd/mm/yyyy Reason for leaving
□□/□□/□□□□ □□/□□/□□□□ _____

Employer _____

Type of Business _____ Job Title _____

Address _____

Type of work _____

From dd/mm/yyyy to dd/mm/yyyy Reason for leaving

□□/□□/□□□□ □□/□□/□□□□ _____

C. We will need to contact the above employers covering the past 3 years, one of which will be your current/last employer.

Do you have any objection to this? YES/NO If Yes please give reasons:

EDUCATION

Schools	from	to	Examinations and results
College/University	from	to	Courses and results
Further Education & formal training	from	to	Courses and results

Professional membership and qualifications (you may be asked to produce appropriate certificates)

INTERESTS

Please give brief details of pastimes, hobbies, sports

Have you ever held a position of responsibility? YES/NO. If YES, give details:

REFERENCES

Please supply the names and addresses of two professional people whom we may contact for character references. State the relationship you have with these people (e.g. vicar, tutor etc.), and how long you have known them.

Name	Address	Relationship	Length of time

DECLARATION (Please read this carefully before signing)

1. I confirm that the above information is complete and correct and that any untrue or misleading information will give the employer the right to reject my application, to withdraw any employment contract offered or, if employed.
2. I agree that the organisation reserves the right to require me to undergo a medical examination.
3. I declare that I have not resigned or been dismissed from any previous appointment for any reason connected with any actual or alleged breach of the rules of any regulatory body (e.g. Lautro or FCA and PRA) or a conviction for any offence involving fraud, dishonesty or violence.
4. I consent to the information given on this form being held by Furness Building Society and used in connection with this application, and will make appropriate enquiries and seek references from the persons and businesses named on this form and from any other Lautro or PIA Members or their Appointed Representatives which I have represented or from any SRO, RPB, FSA (formerly SIB), DSS or Benefits Agency.
5. I consent to the information given on this form being held by Furness Building Society and used in connection with this application for employment. I also consent to this information to be partly or fully checked through Experian Ltd and if appropriate for the position applied for, I consent to a check being made with the Criminal Records Bureau.
6. I understand that I must not act as an introducer until I have received signed authorisation to do so.
7. For the purposes of the Data Protection Act 1998 the Society is the Data Controller responsible for the processing of my personal data. Data held by the Society is used for staff administration purposes and I understand that I may request in writing a copy of my personal details held by the Society.

Signed _____ Dated _____

To confirm _____ Dated _____

'Fit and Proper'.

(Personnel Agreed Signature)

FOR OFFICE USE ONLY

Employee Number _____ Date Received _____ Checklist complete YES/NO

Records complete: YES/NO Staff _____ Credit check YES/NO

Equal Opportunities

We promote a working environment in which diversity is recognised, valued and encouraged. We seek to ensure employees are treated fairly and without favour or prejudice. Please could you provide us with the information requested below to help us monitor equal opportunities within our organisation?

Information you provide is anonymous and remains strictly confidential. We will store and use it in accordance with data protection principles. It will only be used for the purpose of monitoring equal opportunities. You are under no obligation to answer any particular question.

Gender

Please tick the appropriate box: Female Male Transgender

Ethnic Monitoring

How would you describe your ethnic origin?

Asian / Asian British	Mixed / multiple ethnic group	White
<input type="checkbox"/> Indian	<input type="checkbox"/> White and Black Caribbean	<input type="checkbox"/> English / Welsh / Scottish / Northern Irish / British
<input type="checkbox"/> Pakistani	<input type="checkbox"/> White and Black African	<input type="checkbox"/> Irish
<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> White and Asian	<input type="checkbox"/> Gypsy or Irish Traveller
<input type="checkbox"/> Chinese	<input type="checkbox"/> Any other mixed / multiple ethnic background. Please specify: _____	<input type="checkbox"/> Any other white background. Please specify: _____
<input type="checkbox"/> Any other Asian background. Please specify: _____		
Black / African / Caribbean / Black British	Other Ethnic Group	
<input type="checkbox"/> African	<input type="checkbox"/> Arab	
<input type="checkbox"/> Caribbean	<input type="checkbox"/> Any other ethnic group. Please specify: _____	
<input type="checkbox"/> Any other Black / African / Caribbean background. Please specify: _____		

Disability

The Equality Act 2010 defines disability as “a physical or mental impairment which has a substantial and long term effect on a person’s ability to carry out normal day to day activities”. Do you consider yourself to have a disability or a long-term health condition based on this definition?

Yes No