



# Application Form

## CONSTRUCTION RELATED OCCUPATIONS (NVQ/SVQ UNIT-BASED CARDS)

### HOW TO APPLY

Enter your name, address and other personal details on this page

Provide a passport-size colour photograph of yourself. Write your name and National Insurance number clearly on the back of the photograph. Attach the photograph to this form in the space provided

Give details of the health and safety awareness testing/training you have received in Section A

Hand this form to your employer (NOT your agency), together with all supporting documents (certificates, etc) and ask him to complete Section B

Fill in the boxes using black ink and capital letters without touching the sides.

A B C D E F G H I J

Upon satisfactory completion of this form and appropriate payment, you will receive your Construction Related Occupation SKILLcard, in accordance with the conditions of Engineering Services SKILLcard. For further information, visit the SKILLcard website at [www.skillcard.org.uk](http://www.skillcard.org.uk).

**IMPORTANT NOTE:** If possible, please send original health and safety test certificate for verification. It will be returned to you along with your SKILLcard. If you are unable to send an original, a photocopy will suffice. If you send a photocopy, your employer must verify and sign it, and stamp it with the company stamp

**PAYMENT:** Please attach a cheque for registration fee for £25.00 made payable to 'Engineering Services SKILLcard Ltd'

**PLEASE RETURN THIS FORM** to Engineering Services SKILLcard, Old Mansion House, Eamont Bridge, Penrith, Cumbria CA10 2BX

If you have any queries about this form or how to complete it, call us on 01768 860406

Please tick the box which best describes your occupation. Tick one box only

- |   |   |
|---|---|
| <input type="checkbox"/> Air Handling Unit Movement Specialist  | <input type="checkbox"/> Ductwork Cleaning Specialist               |
| <input type="checkbox"/> BMS/Building Controls Engineer   | <input type="checkbox"/> Fire Sprinkler Installer                   |
| <input type="checkbox"/> Building Water Treatment Service Provider  | <input type="checkbox"/> Humidification Engineer                    |
| <input type="checkbox"/> Compressed Air *Installer/*Maintainer/<br>*Commissioning Engineer (*delete as appropriate) | <input type="checkbox"/> HVAC Plant Movement Specialist             |
|   | <input type="checkbox"/> Underfloor Heating Installer (Wet Systems) |
|   | <input type="checkbox"/> Ventilation Hygiene Specialist             |

### YOUR DETAILS

Surname

First Name

House Number / Name

Street

Town

Postcode

 - 

National Insurance Number

 -  -  -  - 

Date of Birth

  /   /    

Home Telephone Number

 - 

Mobile Telephone Number (optional)

 - 

E-Mail Address

Your Sex

Male  Female

Date you started in the industry

  /   /    

How would you describe your Ethnic Origin?

- |  |   |
|--|---|
| <input type="checkbox"/> White                     | <input type="checkbox"/> Asian (Indian/Pakistani/Bangladeshi) |
| <input type="checkbox"/> Black (African descent)   | <input type="checkbox"/> Asian (Chinese)                      |
| <input type="checkbox"/> Black (Caribbean descent) | <input type="checkbox"/> Other (e.g. mixed race)              |

### APPLICANT'S DECLARATION

I certify that the details on this application are correct and complete to the best of my knowledge

I acknowledge that the personal information given here will be used for the purposes of processing my application for an Engineering Services SKILLcard. I also understand that, once I have been issued with my Engineering Services SKILLcard, information from this application form may be held on a database in accordance with the Data Protection Act 1998

Signed

Date

  /   /

