

Temporary Candidate Detail and Declaration



Candidate Name:

Reference Number:

Tax and Deductions Information

National Insurance Number:	Tax Documents Submitted:	P46 <input type="checkbox"/>	P45 <input type="checkbox"/>	P38S <input type="checkbox"/>
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Bank Account Information

Account Name:	Account No:	Sort Code:	Building Society Roll No:
Bank Name:	Bank Address:		

Permission To Work In The UK

Do you have immigration permission to work in the UK?		Yes / No (Delete clearly as appropriate)	
In line with Home Office guidance on the prevention of illegal working we will need to verify and take a copy of your original ID documentation as evidence of your right to work in the UK if you are to be engaged by Cream Recruit for temporary work.			
Internal Use Only	Visa Checked and copy held on file: <input type="checkbox"/>	Expiry Date:	

Employer References (To be current/last employer and previous employer)

Reference 1

Reference 2

Name of Referee:	Name of Referee:
Job Title of Referee:	Job Title of Referee:
Company Name:	Company Name:
Company Address:	Company Address:
Company Telephone Number:	Company Telephone Number:
e-mail address of Referee:	e-mail address of Referee:

Declaration

Should I become a Temporary Worker I confirm I will have read and accepted the issued Terms of Engagement for Temporary Workers which also confirms the minimum hourly rate of pay I will be paid for temporary assignments. Whilst on temporary assignment from Cream Recruit I will ensure my signed timesheet is returned to the Branch by 9.00am on the Monday following the week of work. Whilst on temporary assignment from Cream Recruit I will regard all available information as confidential and I will not divulge it to any third parties plus I will comply to the Health and Safety regulations of all the companies/agents I am assigned to. If during the course of a temporary assignment, the Client wishes to employ me direct I will acknowledge that Cream Recruit will be entitled either to charge the client an introduction/transfer fee, or to agree an extension of the hiring period with the Client (after which I may be employed by the Client without further charge being applicable to the Client.

Candidate Signature: _____

Date: _____

WORKING TIME REGULATIONS 1998 – OPT OUT AGREEMENT

1. DEFINITIONS

- 1.1 In this agreement the following definitions apply:
 "ASSIGNMENT" means the period during which the Temporary Worker is engaged to render services to the client
 "CLIENT" means the person, firm or corporate body engaging the services of the Temporary Worker
 "WORKING WEEK" means an average of 48 hours each week calculated over a 17 week reference period
 1.2 Reference to the singular include the plural and reference to the masculine include the feminine and vice versa
 1.3 The headings contained in these Terms are for convenience only and do not affect their interpretation

2. RESTRICTION

- 2.1 The Working Time Regulations 1988 provide that the Temporary Worker shall not work on an Assignment with the Client in excess of the Working Week unless s/he agrees in writing that this limit should not apply

3. CONSENT

- 3.1 The Temporary Worker hereby agrees that the Working Week limit shall not apply to the Assignment

4. WITHDRAWAL OF CONSENT

- 4.1 The Temporary Worker may end this Agreement by giving Cream Recruit 3 months notice in writing
 4.2 For the avoidance of doubt, any notice bringing this Agreement to an end shall not be construed as termination by the Temporary Worker of an Assignment with a Client.
 4.3 Upon the expiry of the notice period set out in clause 4.1 the Working Week limit shall apply with immediate effect

5. THE LAW

- 5.1 These Terms are governed by English Law and are subject to the exclusive jurisdiction of the English Courts

Candidate Signature

Date

TEMPORARY WORKER HEALTH & SAFETY DECLARATION (The Health & Safety at Work etc Act 1974)

All employers must have a Health & Safety Policy stating who is responsible for Health & Safety and the Health & Safety arrangements in place. It is your responsibility to familiarise yourself with this policy, particularly the procedures for fire, first aid and accidents upon arrival at the clients' premises. All temporary workers have a duty under the Health & Safety Act to take reasonable care to safeguard their own safety and the safety of anyone who may be affected by their work activities and actions and to co-operate with the Client and others in meeting statutory regulations. The Act also requires temporary workers not to interfere with or misuse anything provided to protect their health, safety or welfare in compliance with the Act.

Information should also be available on the following as appropriate:

- Provision & Use of work Equipment Regulations (PUWER) 1998
- Health & Safety (Display Screen Equipment) Regulations 1992
- Health & Safety (First Aid) Regulations 1981
- Personal Protective Equipment (PPE) Regulations 1992
- Control of Substances Hazardous to Health Regulations 1999 (COSHH)
- Workplace (Health & Safety Welfare) Regulations 1992
- Manual Handling Operations Regulations 1992
- The Fire Precautions (Workplace Regulations) 1997
- Noise at Work Regulations 1989
- Electricity at Work Regulations 1992

PERSONAL INFORMATION

Please complete the questions below to aid Cream Recruit in providing you with the right environment to work in and to cater for any special needs you may have.

Disabled Persons – Do you have special requirements to aid your disability? Yes / No
If Yes, what are they?

Do you have any special needs or requirements relating to any medical condition(s) that the client should be made aware of in case of emergency? Yes / No
If Yes, what are they? (i.e back problem, eye problem, diabetic, asthmatic, epilepsy etc.)

Are you vegetarian or do you belong to a religion that prohibits you from working in a food environment? Yes / No

Do you have any allergies? Yes / No
If Yes, what are they?

I have read and completed the Health & Safety Declaration to the best of my knowledge and understand that I must inform Cream Recruit of any changes to the above personal information.

Candidate Signature

Date

HEALTH SELF ASSESSMENT DECLARATION FOR NIGHT WORKERS

In compliance with the Working time Regulations the purpose of this declaration is to determine whether you are fit to carry out night work whilst on assignment from Cream Recruit.

Whilst there is no difference in the physical demands of night work compared to day work the human body is naturally programmed to sleep at night. The disruption to this sleep pattern can aggravate certain medical conditions, albeit often temporarily. Additionally the reduced access to services and facilities that may be apparent both inside and outside the workplace at night can have an effect.

Please answer the following questions. If your answers raise doubts about your fitness for night work, then unfortunately you will not be assigned to Clients for night work unless you are able to provide proof that you are physically able to do so having been assessed by a suitably qualified health care professional.

Do you have any health concerns which you feel may prevent you from working at night? If YES, are these based on:

- a. The requirement to take medication (tablets, insulin injections etc) on a strict timetable
- b. Heart or circulatory problems that could be aggravated by the additional stress/required stamina that night work may require
- c. Stomach or intestinal disorders where the regularity/timing of meals are important
- d. Medical conditions that affect the ability to sleep during the day or are affected by changing sleep patterns
- e. Chronic chest or respiratory disorders whose night time symptoms are significantly worse than in the day time
- f. Any other health related reason.

Yes	No

If you have entered yes to any of the above please enter specific details

Candidate Signature

Date

DRIVERS DECLARATION FORM (to be completed by candidates registering for DRIVING WORK – ORDINARY LICENCE OR LGV)

	Yes	No	If Yes please give detail
1. Have you been convicted of any motoring offence(s) during the past five years?			
2. Have you during the last ten years had your licence suspended?			
3. At the date of signing this form is there any prosecution pending or has anything occurred which may result in a future prosecution?			
4. Have you had any road traffic accidents within the last five years?			
5. Have you suffered any illness within the last five years which has affected your driving ability?			

I undertake to inform Cream Recruit of anything occurring which may affect my driving ability

I undertake to inform Cream Recruit of the number of hours I have worked within any given 24 hour period, should I at any time work as a Driver on my own behalf, or on behalf of any person or company, between or during any period(s) of driving that I may do as a result of any introduction by Cream Recruit.

I hereby acknowledge that whilst I will be paid by Cream Recruit on behalf of the person or company to which Cream Recruit introduce me as a Driver, I will be and will remain during the term of each and every assignment the employee of the person or company to whom I am introduced and that at all times I will be under the direction and control of each and every such employer as to what I do and the manner in which it is done.

SIGNED: _____ PRINT NAME: _____ LICENCE NO: _____

I HAVE INSPECTED THE ABOVE LICENCE IN THE NAME OF: _____ AND AT THIS DATE IT IS A VALID LICENCE

SIGNED: _____ PRINT NAME: _____ JOB TITLE: _____ DATE: _____

(on behalf of Cream Recruit Limited)