

## **CSCS SMARTCARD APPLICATION FORM**

For Technical, Supervisory and Management Occupations

Authorisation code

(See reverse of form for use)

A1 Your details:	se complete this section		CSCS Registration No. (if known)
Title			
Surname		ATTACH A	National Insurance No.
Family name Forename		PASSPORT PHOTOGRAPH OF	Date of Birth
Given name		THE APPLICANT HERE WITH GLUE.	
Home		DO NOT STAPLE.	DD MM YYYY
Address			Home/Work Telephone Number
			Mobile Number
Dos	rtcodo		
	stcode		We may contact you on the numbers above if there is a quewith your application
E-mail address:			
A2 I confirm that I meet: current	CSCS Health & Safety requireme		e a copy of your Health, safety and environment test verse for more information).
A3 Send my card to: my hom	e address The company	address in section C	
a different address, which is:			
			Postcode
A4 I confirm to the best of my known	owledge the information above is	correct and I agree to con	nply with the CSCS Scheme rules as laid
			n will be used by CITB for the purposes of
	eme, this may include passing on r o a secure database accessible via		or Training Providers and for this purpose,
			you will be given 90 days to resolve any
	ned after 90 days will be subject to telephone or e-mail to let you kno		
	u. Please tick this box if you wish t		
Your signature:	Da	nte: – –	Please send VAT receipt
		D D M M Y Y	V V
			1 1
SECTION B - Occupation & Card	d Details - please complete this	section	, ,
	d Details - please complete this	section	· · ·
CSCS Occupation Title:			pations as titles vary e.g. The CSCS
CSCS Occupation Title: Your occupation must be one as occupation title for a groundworker	s listed on the CSCS website:	www.cscs.uk.com/occup	
CSCS Occupation Title: Your occupation must be one as occupation title for a groundworker Please tick <b>one</b> box from section 1	s listed on the CSCS website:	www.cscs.uk.com/occup	pations as titles vary e.g. The CSCS necessary evidence - see overleaf.
CSCS Occupation Title: Your occupation must be one as occupation title for a groundworker Please tick one box from section 1 1. Card Type	s listed on the CSCS website:	www.cscs.uk.com/occup ive - Don't forget to attach any	
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#### Section D - Declaration and Evidence requirements

#### **Declaration**

Your current employer or immediate line manager must complete Section C. If you are self-employed this should be completed by your main contractor. If you are unemployed this can be completed by another CSCS card holder who holds either a Gold, PQP, Platinum or Black CSCS card. The applicant must **not** sign this section.

#### **Evidence Required**

Renewals - no other proof is required.

NVQ or SVQ route - a photocopy of your NVQ or SVQ certificate at level 3, 4, 5, 6, or 7.

Trainee route - proof of registration onto an NVQ or SVQ or another further / higher education construction related qualification.

**Experienced Technical Supervisor or Manager** - you must provide proof of NVQ or SVQ registration and profiling at an NVQ or SVQ accredited centre. The NVQ or SVQ should be achieved within the life of the card.

**Academically Qualified Person (AQP)** - a copy of your Construction related Degree, HND or HNC, please visit <a href="https://www.cscs.uk.com/aqp">www.cscs.uk.com/aqp</a> for a full list of acceptable qualifications.

\*The CITB Health, safety and environment test at the appropriate level must have been passed within 2 years of making your application. Confirmation of this test will be stored on the CITB database.

Visit www.cscs.uk.com/occupations or call 0344 994 4777 to find out the level of test required.

### Section E - Check list for returning application forms

# IF YOU HAVE NOT ALREADY DONE SO RING **0344 994 4777** TO FIND OUT HOW YOU CAN GET A FASTER SERVICE. Quick Check List

Before returning your application please ensure that you have:

Completed Section A with your details, attached a photograph and signed and dated the form.		
Indicated your occupation and which card type you require in Section B.		
Ensured the relevant declarations are completed in Section C.		
Included any copy evidence as detailed in Section D.		
Payment - either		
<ul> <li>Enclosed payment of £30.00 by cheque (cheques should be made payable to CITB) or</li> </ul>		
<ul> <li>If you have pre-paid for your application form enter the authorisation code you were given (see box in top right hand corner of front of this form.)</li> </ul>		
Send form to CSCS, PO Box 114, Bircham Newton, King's Lynn, Norfolk, PE31 6XD		

Note: Only original signatures will be accepted, photocopy or per pro (pp) signatures will NOT be accepted.

CSCS/TSM/09/13