

<<<<Insert Your Company Letterhead/Logo>>>>

Employment Agency Reference

Form Ref. IDU14/2018
Strictly Private and Confidential

Please ensure that all sections are completed fully.

Applicants Details	
Applicants Name	
Also known as	
Applicants Address	
D.O.B	
NI Number	

Dear Sir (it's recommended that a name is used as the addressee)

The above named has applied to **[SPONSORING COMPANY NAME]** for the position of **[POSITION]**. He/she has advised us that he/she was registered with your agency from **[DATE]** to **[DATE]**

I would therefore be grateful if you would complete the attached questionnaire and return it to me as soon as possible. This information will be required to secure an identity pass and information will be shared with Belfast International Airport and possibly with the control authorities.

Would you please authenticate your reply by using your company stamp in the space provided, or by attaching a compliment slip/headed paper.

You may be contacted by the Belfast International Airport Security Team to verify this reference.

We may not be able to offer employment unless these details are returned and verified, therefore an early reply would be appreciated.

May I thank you in anticipation of your co-operation in this matter and assure you that your reply will be treated in the strictest confidence.

Yours faithfully

Name _____

Position in Company _____

EMPLOYMENT HISTORY

Employment Details	
Company Name:	
Contact Person:	
Contact Number:	
Please confirm the specific dates when the applicant was employed by your company	From: ____/____/____ Day month year To: ____/____/____ Day month year
How many hours a week was/is the applicant contracted to work?	
Is the applicant still employed in your company	Yes <input type="checkbox"/> No <input type="checkbox"/>

Authorised By (Pass Office Staff Print Name)	Signed	Date

Employment Details	
Company Name:	
Contact Person:	
Contact Number:	
Please confirm the specific dates when the applicant was employed by your company	From: ____/____/____ Day month year To: ____/____/____ Day month year
How many hours a week was/is the applicant contracted to work?	

Is the applicant still employed in your company	Yes <input type="checkbox"/> No <input type="checkbox"/>
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Authorised By (Pass Office Staff Print Name)	Signed	Date

Employment Details	
Company Name:	
Contact Person:	
Contact Number:	
Please confirm the specific dates when the applicant was employed by your company	From: ____/____/____ Day month year To: ____/____/____ Day month year
How many hours a week was/is the applicant contracted to work?	
Is the applicant still employed in your company	Yes <input type="checkbox"/> No <input type="checkbox"/>

Authorised By (Pass Office Staff Print Name)	Signed	Date

Employment Details	
Company Name:	
Contact Person:	
Contact Number:	

Please confirm the specific dates when the applicant was employed by your company	From: ____/____/____ Day month year To: ____/____/____ Day month year
How many hours a week was/is the applicant contracted to work?	
Is the applicant still employed in your company	Yes <input type="checkbox"/> No <input type="checkbox"/>

Authorised By (Pass Office Staff Print Name) 	Signed 	Date
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To the best of your knowledge, is there anything known about the applicant, which suggests a lack of integrity or otherwise reflects adversely upon their suitability to hold an Airport Security ID Pass allowing them access to sensitive areas of the Airport? **Yes** **No**

If you have answered "yes" please provide reason/s:

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Company Stamp

Referee Details	
Agency Name	
Address	
Email	
Telephone Number	
Fax Number	
Mobile Number	
Print Name	
Signature:	
Date:	

Authorised By (Pass Office Staff Print Name)	Signed	Date

FOR AUDIT USE ONLY WHERE APPLICABLE

Form Audited By	
Date	
Signed	