



The Resin Flooring Association

16 Edward Road / Farnham / Surrey / GU9 8NP / t: 01252 714250 / www.ferfa.org.uk

**FeRFA APPRENTICESHIP SCHEME
CANDIDATE ENROLMENT FORM**

SCHEME	In Situ Resin Flooring / Prepare and Profile (indicate which)
START DATE	

PERSONAL DATA

NAME	
DATE OF BIRTH	
HOME ADDRESS	
TOWN	
POSTCODE	
TEL	
MOBILE	
EMAIL	
N I NO	

QUALIFICATIONS (continue on separate sheet if necessary)

TYPE (eg GCSE)	SUBJECT	GRADE	YEAR TAKEN

Has candidate taken and passed the H&S touch screen test? YES / NO

Does candidate hold a current CSCS card, YES / NO

If YES please give number _____

Does candidate have any learning difficulties YES / NO

If yes please give details separately

What is the candidate's experience in laying resins ? _____

EMPLOYER

COMPANY	
CONTACT NAME (eg Supervisor)	

Please also forward (via email) a photograph of the candidate (head and shoulders). This can be taken on a digital or phone camera.