

## **SAFEHOUSE**



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## **Course Application Form**

Door Supervisor		Security Guarding		Door Supervisor Top Up	
Personal License Holder		Security Guarding Top Up		Alcohol in Awareness	
Name:		Age:		D.O.B.:	·····
Address:					
Postcode:	Natio	onal Insurance No.:			
Tel. No.: Mobile:					
Are you currently working? YES / NO Who for ?:					
Have you worked in Security? YES / NO Who for ?:					
Have you ever held a badge for security? YES/NO Badge No.:					
Have you ever achieved a	n NVQ/ (	City & Guilds/or Equiva	alent Qua	lification? YES / NO	
Where did you hear a	oout Safe	house Training?			
Internet I Door staff I Yellow Pages I Safehouse Office I Other (Please Specify)					
PLEASE NOTE: Comm	nunication	in English, both oral and	d-written,	is an integral requirement of	the SIA
		competencies for	licensing.		
Course Location  Sporting Club), 630 Prince of Wales Road, Darnall, No 6, 12 O'Clock Court, 21 Attercliffe Road, Sheffield, Sheffield, S9 4ER.  South Yorkshire, S4 7WW					







