

To be completed by the applicant and supported by an independent declaration.
Please complete this form in BLOCK CAPITALS using a BLACK or BLUE ballpoint pen.
Please ensure the form is completed correctly to prevent it being returned.

SECTION A

Applicant Details

A1 Title

Surname

Forename

Home Address

Postcode

Telephone Number

E-mail

CPCS Card No. (if applicable)

National Insurance No.

Date of Birth - -
D D M M Y Y Y Y

A2 I confirm that to the best of my knowledge the information above is correct. I accept this personal data will be held and used in accordance with the CPCS Fair Processing Policy set out in the Scheme Booklet for Operators.

In signing this form I agree to comply with the terms and conditions set out in the CPCS Scheme Booklet.

Applicant signature

Date - -
D D M M Y Y Y Y

ConstructionSkills may contact you to provide you with information on our other products, services and activities, and those of selected third party organisations, that we think may be relevant and useful to you.

If you agree to be contacted for these purposes by **telephone or email**, please tick this box

If you **DO NOT** want to receive such information by **mail**, please tick this box

SECTION B

Other Qualifications

B1 ConstructionSkills Health & Safety Test passed within 2 years of the date of application receipt

SECTION C

CPCS Category (ies)

Category Code and Endorsement	S/NVQ*	Category Code and Endorsement	S/NVQ*	Category Code and Endorsement	S/NVQ*
A <input type="text"/>	<input type="checkbox"/>	A <input type="text"/>	<input type="checkbox"/>	A <input type="text"/>	<input type="checkbox"/>
A <input type="text"/>	<input type="checkbox"/>	A <input type="text"/>	<input type="checkbox"/>	A <input type="text"/>	<input type="checkbox"/>
A <input type="text"/>	<input type="checkbox"/>	A <input type="text"/>	<input type="checkbox"/>	A <input type="text"/>	<input type="checkbox"/>

*Please tick (✓) and attach copies of relevant certificates

SECTION D

Mailing Address

Please enter below where you would like the card to be sent: Applicant as in Section A1 Other (as below)

Company name (if applicable)

Address:

Postcode

SECTION E

Independent Declaration

I certify that the details on this application are correct to the best of my knowledge and the photograph in Section A1 is a true likeness of the applicant detailed above.

Job role S/NVQ Assessor / Employer (delete as applicable)

CPCS No.

Name

Signature

*Please complete if S/NVQ Assessor

*Centre Role

*Centre Number

Centre or Employer Name

Date - -
D D M M Y Y Y Y

SECTION F

Payment

Please notify how you wish to pay the £25.00 card application fee:

Cheque Please make payable to 'ConstructionSkills' and if you require a receipt please tick this box

Existing Credit Account: please complete the information below to enable the invoice to be raised.

Credit Account Ref. Purchase Order Number or other Invoice Reference (optional)

Company Name Postcode

Invoice Address

APPLICATION TO UPGRADE TO A FULL CPCS COMPETENT OPERATOR CARD

This application form is appropriate for individuals applying to convert their red Trained Operator card to a blue Competent Operator card on achievement of the appropriate S/NVQ, with the relevant required units, to support the categories requested.

SECTION G Terms and Conditions of CPCS Application

1. This form is only valid when Section E is signed by the S/NVQ Assessor who delivered the S/NVQ as detailed in Section C.
2. It is the responsibility of the applicant to ensure that all CPCS requirements for the application as set out in the Scheme Booklet for Operators are adhered to, including:
 - a) the applicant's stated details are correct and the photograph in Section A is a true likeness of the applicant,
 - b) the applicant has a ConstructionSkills Health & Safety Test passed within 2 years of the date of application receipt, and
 - c) the applicant already holds a red Trained Operator card.
3. Application forms are subject to audit checks in accordance with CPCS requirements. Application forms, which are incorrect or not found to meet the requirements, will be returned rejected.

SECTION H Completion Requirements

Section A: Complete Section A with full details, and attach a photograph that meets passport requirements, with a light background.

Section B: Confirm that passed, but there is no need to attach evidence of the ConstructionSkills Health & Safety Test pass as this can be independently validated.

Section C: Enter the appropriate category code(s) being applied for, and confirm achievement of the appropriate S/NVQ with the relevant required units and attach a copy of the certificate.

Please note: CPCS has an agreement with CAA which means that certificates need not be attached as achievement can be independently validated. Please write CAA into the S/NVQ box.

Current category codes and S/NVQ requirements can be found on the ConstructionSkills website at www.cskills.org/cpcs.

If there is insufficient space to list all categories required, please continue onto another application form completing Sections A (with the exception of the photograph), C and E as it must have an independent validation.

If applying for categories A61 and/or A62 there is currently no S/NVQ available. CPCS has provided a Renewal/Competence Assessment (accessible from the website) that is employer endorsed. Please complete this application form ticking the S/NVQ box, and attach a copy of the completed and endorsed Renewal/Competence Assessment.

Section D: It should be noted that if a mailing address is not provided the card will be sent to the applicant's home address as provided in Section A1.

Section E: This section requires an independent declaration of the applicant's identity by:

- the S/NVQ Assessor who delivered the S/NVQ Assessment with the S/NVQ Centre's details completed – if the S/NVQ has just been achieved, or
- an employer representative if the S/NVQ requirements have already been met (ie unit held) and due to the changes in the Scheme rules this allows further categories on the Trained Operator card to be upgraded to a Competent Operator card, or
- the employer representative that signed Section C of the Renewal/Competence Assessment form if applying for categories A61 and/or A62.

Section F: Payment must be included with this application. However, please do not send cash.

This is a non-refundable fee for the service of processing the application.

Forms will be returned to the address detailed in Section D, if the correct payment/invoicing information is not attached.

If you would like a new ConstructionSkills credit account to be set up please send a request on company headed paper and include paperwork to a minimum value of £100. Please note this will have an impact on the time to process the paperwork submitted.

General: Please return the completed form with payment, a photograph and copies of relevant certificates to:
CPCS, PO BOX 320, Bircham Newton, Kings Lynn, Norfolk, PE31 6WD

If you require help completing this form please contact CPCS on **0844 815 7274**.

On receipt of this application it will usually take 15 working days to produce the card, providing all registration conditions have been met.

If you have any comments on the service you have received from ConstructionSkills Data Management Unit please contact the Data Management Unit Manager at the address given above.