

# APPLICATION FOR OVERSEAS SCAFFOLDER TRAINING SCHEME (OSTS) CARD



Please read notes overleaf

## SECTION A - You, the applicant, must fill in this section. Fill any blank areas and tick the correct boxes.

### A1 Your details:

Title

Surname

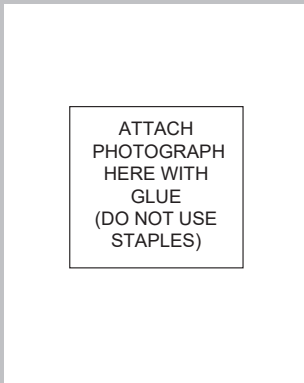
Forename

Home Address

Country

Postcode

E-mail address:



Registration No.

Passport/Visa Number

Telephone Number

Date of Birth  -  -

DD MM YYYY

Type of application being made:    New Card     Duplicate     Renewal

### A2 Send my card to a different address, which is:

Postcode

**A3** I confirm to the best of my knowledge the information above is correct and I agree to comply with the CISRS criteria as laid out in the CISRS CAP609 General Information Booklet (available from [www.cisrs.org.uk](http://www.cisrs.org.uk)). I understand and agree that the information on this form will be used by CISRS/NOCN Job Cards for the purposes of administering the CISRS Scheme and that the data will be entered onto a secure database, this may include passing on information relating to the individual's scheme membership to employers or training providers.  
**Please note that all application fees are non-refundable. If your application is incomplete you will be given 180 days to resolve any issues. Any applications returned after 180 days will be subject to an additional £30.00 non-refundable application fee.**

#### Fair Processing Notice

The information you provide to us will be used for administering the CISRS Scheme. Your data will be held securely and treated confidentially and will not be disclosed to external parties other than as required for the purposes described above, which may include sharing your information on a construction training register as well as with employers, awarding organisations or training providers. For information explaining your legal rights and how we use your information, please view our Privacy Notice online at [www.nocnjobcards.org/privacy/](http://www.nocnjobcards.org/privacy/)

Applicant Signature

Date:  -  -

DD MM YYYY

## SECTION B - Scaffolding Courses completed - you, the applicant, employer or sponsor may complete this section

Course Type	Please tick	Training Centre Name	Course Type	Please tick	Training Centre Name
CISRS Level 1 OSTS	<input type="checkbox"/>	<input type="text"/>	CISRS Supervisor OSTS	<input type="checkbox"/>	<input type="text"/>
CISRS Level 2 OSTS	<input type="checkbox"/>	<input type="text"/>	CISRS Basic Inspection OSTS	<input type="checkbox"/>	<input type="text"/>
CISRS Level 3 OSTS	<input type="checkbox"/>	<input type="text"/>	CISRS Advanced Inspection OSTS	<input type="checkbox"/>	<input type="text"/>
CISRS Level 4 OSTS	<input type="checkbox"/>	<input type="text"/>			

**Copies of training certificates must be attached, failure to do so will result in your form being returned. Please do NOT send originals.**

Retrospective Course Details

Card Type: (Please tick)    Level 1 OSTS     Level 2 OSTS     Level 3 OSTS     Level 4 OSTS     Supervisor OSTS

                                 Basic Inspection OSTS                                    Advanced Inspection OSTS

## SECTION C - Centre Declaration - to be completed by the UK based CISRS Approved Centre

By completing and signing the declaration below, I certify that:

- The details on this form are correct to the best of my knowledge and that the photograph is a true likeness of the applicant.

**PLEASE ENSURE THIS BOX IS FULLY COMPLETED** (The applicant cannot complete this section)

Employer name:

Address:

Postcode

Date

Signature:

Print name:

Telephone number:

## CHECKLIST BEFORE RETURNING THIS APPLICATION

### SECTION A - APPLICANT'S DETAILS

Please complete all parts of this section.

The applicant must sign and date the application.

### SECTION B - TRAINING COMPLETED

This section must provide details of courses undertaken and training certificates for these courses must be attached to the form for New and Endorsement applications or the form will be returned. Please do **NOT** send originals.

For renewals the applicant will be issued a card showing the same categories recorded on the Record Scheme database unless evidence of further training meeting scheme criteria is attached to this application form.

### SECTION C - CISRS CENTRE DECLARATION

This section must be completed by the UK based CISRS Approved Centre. All cards will be sent to this UK address. Failure to complete Section C will result in the form being returned.

### BEFORE EMAILING OR POSTING, PLEASE CHECK THE APPLICATION AND ENSURE THE FOLLOWING ARE ENCLOSED:

**CHECKLIST:** Please tick

**Level 1 Card**  • CISRS Level 1 Scaffolding (Overseas) Certificate (OSTS)

**Level 2 Card**  • CISRS Level 1 Scaffolding (Overseas) Certificate (OSTS)  
• CISRS Level 2 Scaffolding (Overseas) Certificate (OSTS)

**Level 3 Card**  • CISRS Level 1 Scaffolding (Overseas) Certificate (OSTS)  
• CISRS Level 2 Scaffolding (Overseas) Certificate (OSTS)  
• CISRS Level 3 Scaffolding (Overseas) Certificate (OSTS)

**Level 4 Card**  • CISRS Level 1 Scaffolding (Overseas) Certificate (OSTS)  
• CISRS Level 2 Scaffolding (Overseas) Certificate (OSTS)  
• CISRS Level 3 Scaffolding (Overseas) Certificate (OSTS)  
• CISRS Level 4 Scaffolding (Overseas) Certificate (OSTS)

**Supervisor Card**  Scaffolding Supervisor (Overseas) Certificate (OSTS)

**All cards**  Glossy Passport Sized photograph attached with glue to the Box in Section A. Please do not use staples.

**Payment - please call 0300 999 1177 (option 1, option 2)** and make a payment via credit/debit card for £30.00, you will then be given an authorisation code to write on the front of the application. Or, if you hold an account with NOCN Group, please attach an official Purchase Order requesting an invoice.

If emailing in your application, you **MUST** print off this form and **complete and sign by hand, with a ball point pen**, before scanning back in and emailing to [cisrs@jobcards.org](mailto:cisrs@jobcards.org), attaching any certificates, passport style photos etc that are required. **PLEASE NOTE** - Applications that are signed electronically will **NOT** be accepted and will be rejected back to you.

Application forms should be emailed or posted to:

Email : [cisrs@jobcards.org](mailto:cisrs@jobcards.org)

or

Post: CISRS, NOCN Job Cards, PO Box 1242, Kings Lynn, Norfolk, PE30 9FQ.