

NET Candidate Registration Form



Once this form is completed please return it to your assessment centre. All fields are mandatory.

To view how NET uses candidate data please view our Privacy Policy at www.netservices.org.uk/policies

Type of assessment *(Please tick)*

AM2 AM2S AAC FESS (Fire) FESS (Security) FESS (Fire & Security)

Candidate details *(Please complete all fields)*

Title First Name

Last Name

Date Of Birth *(DD / MM / YYYY)* NI Number

Email

Contact Number

Address 1

Address 2

Address 3

Address 4

Town Postcode

Apprentice *(Please tick)*

Yes No U.L.N.

Awarding Body *(Please tick)*

City & Guilds EAL Other *(Please specify below)* N/A

Additional Requirements *(Please tick)* Recognition of Prior Learning *(Please tick)* Yes No

Please refer to NET's Reasonable Adjustments and Special Considerations Policy if needed - www.netservices.org.uk/policies

Current Employer *(Please complete all fields)*

Company Name

Email

Contact Number

Address 1

Address 2

Address 3

Address 4

Town

Postcode

If you have no employer or are self-employed please put **SELF EMPLOYED** or **N/A**

Training Provider *(Please complete all fields)*

Company Name

Email

Contact Number

Address 1

Address 2

Address 3

Address 4

Town

Postcode

If you have no Training Provider or are self-funded please put **N/A**