

CISRS Basic Scaffold Inspection Entry - Scaffolding Experience Confirmation

Name:

CISRS Card Number (if held):

Current Job Role:

Section A - Industry Experience Check/CV (If employed under 2 years please complete Section B)	
Current Company: Employment Start Date:	Construction Experience:
Contact name: Contact number:	Scaffolding activities/ duties:

Section B - Previous Employment		
From: To: Company: Contact name & Number:	Construction Experience:	Scaffolding Activities/Duties
From: To: Company: Contact name & Number:	Construction Experience:	Scaffolding Activities/Duties

Or

Section C - Previous Non-CISRS Inspection Training (please attach copy of certificate)		
Course title	Provider	Date

And

CITB HS&E Test passed within 2 years or Copy of Accepted Exemption (please attach copy)			
Qualification Title	Provider	Start Date	Expiry Date

Delegate Signature.....

Checked by (CENTRE USE ONLY).....Date.....

Endorsement form current employer
Confirmation of scaffolding experience

To whom it may concern:

Employer
Signature:

Date: