



MTR GROUP RECRUITMENT

HEALTH & SAFETY AT WORK AND FOOD SAFETY ACT 1990 SELF-CERTIFICATION FOR FOOD HANDLING

FULL NAME (IN CAPITALS)		
For the purposes of handling food please confirm if you are currently suffering from any sickness disease or infection that is likely to contaminate food or the place where food is prepared, including (by way of example only):	Yes/No	If yes, please give details
1. Do you have or are you a carrier of, enteric fever (typhoid or paratyphoid) or tuberculosis?		
2. If you have been abroad in last three weeks: 2.1 Which countries did you visit? 2.2 Were you ill?		
3. In the last seven days have you suffered from diarrhoea and/or vomiting?		
4. At present are you suffering from: 4.1 skin trouble affecting hands, arms or face? 4.2 boils, styes or septic fingers? 4.3 discharge from eye, ear or gums/mouth?		
5. Do you suffer from: 5.1 an allergy or recurring skin/nose/ear trouble? 5.2 recurring mouth/eye infection? 5.3 a recurring gastrointestinal disorder? 5.4 disorder of kidneys/bladder/bowel? 5.5 recurring chest/respiratory disease? 5.6 any other disease/illness? which could potentially affect the safety of food being prepared by or near you?		

I hereby certify that to the best of my knowledge I have no current symptoms to suggest I am suffering from any sickness, disease or infection that is likely to contaminate food or the place where food is prepared and I hereby confirm that I will not continue working if there is any change to my health which could affect this certification.

I also confirm that whilst I am engaged on any assignment for Personnel Selection I will take every precaution to avoid injury or damage to myself and others and in particular I will not use any machinery unless I am experienced to use such machinery.

Date	Signed
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