

**SMP Consultancy Ltd
87 Godmans Lane
Marks Tey
Colchester
Essex
CO6 1XA**



Application for Mystery Shopper

Please complete this form clearly using black ink, continuing on separate sheets where necessary.

1. Personal Details

Title: (Mr/Mrs/Ms/Other)	
First Name:	
Surname:	
Address:	
Home Telephone Number:	
Mobile Number:	
Email Address:	

2. Other Personal Details

Do you hold a current UK driving licence?	Yes	No
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3. Educational & Professional Qualifications

Please outline your educational and professional qualifications, starting with the most recent, including attendance dates.

School/College/University	Date	Qualifications

7. References

Please give details of two referees, at least one of whom must be your current or most recent employer, or a person who knows you in a professional capacity.

Referee 1:	
Name:	
Position:	
Address:	
Telephone Number:	
Email Address:	
Referee 2:	
Name:	
Position:	
Address:	
Telephone Number:	
Email Address:	

8. Data Protection Notice

The information gathered from this application is processed in accordance with the Data Protection Act 1998 - further details are available from the company.

9. Declaration

I declare that the information I have given above is true and accurate to the best of my knowledge.

Signed:-----

Date:-----

***Completed application forms should sent to Susan Patrick,
Director, SMP Consultancy, at the address on the first page of the
form, or email to susan@smpconsultancy.com***