

Internal Transfer of Data Form

In the event that a pass applicant holds an operational ID pass for a company & wishes to transfer to another company at Gatwick Airport the Internal Transfer form can be used in place of references for the purpose of issuing an ID Pass.

The form needs to be completed, uploaded & submitted via Mtrust with a new pass application within 28 days of the applicant leaving their previous employer.

Discrepancies on the form will result in the ID pass request being refused.

Please note: - Once the ID pass has been issued using the Internal Transfer form, it is the responsibility of the sponsoring company to obtain full 5 year references, GSAT & criminal record check/security clearance. The full history needs to be held on file, for the entire time that the ID pass is operational for audit purposes.

Companies that fail to obtain the full 5 year history for their new staff member will have the facility to use the Internal Transfer form removed.

You are respectfully advised that it is an offence, under the Aviation Security Act 1982, as amended by the Aviation & Maritime Security Act 1990, to knowingly give false information, either for the purpose of, or in connection with, an application for an Airport Security ID Pass.

In signing for an ID pass, signatories & employees agree to abide by the regulations of being a Security ID pass holder & confirm they have been made aware of their responsibilities. Failure to comply may result in disciplinary action or ID pass confiscation.

ID pass holder's responsibilities are documented in Gatwick Airport Directives & must be made available to all staff members.

In the interest of national security & for the prevention & detection of crime, information regarding ID pass authorisation, applicant data & ID pass usage may be disclosed to the police & other control authorities.

Section A – To be completed by the pass applicant, authorising the release of personal data to the new employer for the purpose of applying for an ID pass allowing access to the Critical parts/Restricted areas of Gatwick Airport.

Section B – To be completed by the previous employer. This section needs to be completed by an approved person, directly employed with the company & whom has responsibility for staff personnel records i.e. active authorised signatory, HR representative, company director/owner.

Section C – To be completed by current employer requesting the ID pass. This section needs to be completed by an approved person, directly employed with the company & whom has responsibility for staff personnel records i.e. active authorised signatory, HR representative, company director/owner.

In completing & signing you confirm that you are aware of your responsibility for obtaining the full 5 year references, GSAT & criminal record check/security clearance for company files & audit purposes.



Section A:	TO BE COMPLETED BY APPLICANT
I hereby consent to	(Current Employer)
Applicants Full Name	
Date of Birth///	NI Number
Applicants email address:	
Previous Employer Company na	meID Pass Prefix & No
associated companies processi	otection Act 2018 you consent to Gatwick Airport Limited and/or its nominated agents and ng all personal and/or sensitive data about you. For the avoidance of doubt, processing will to, the transfer of data between associated companies.
Signature	Date/
Section B:	TO BE COMPLETED BY PREVIOUS COMPANY
	impleted by an approved person, directly employed with the company & whom has onnel records i.e. active authorised signatory, HR representative, company
Discrepancies on the form	will result in the ID pass request being refused.
• •	ection A has indicated that they have held a Gatwick Airport ID Pass with your company issued ectives & the information obtained met the requirements set for the issue of an ID Pass into as of Gatwick Airport.
	ication for the person named in Section A to gain access to Gatwick Airport for our company, details below & return the completed form at your earliest convenience.
Company name	LGW Prefix
From: Full Name	
Job Title	//
Email address	
Contact phone number	



Section B continued

Date applicant started employment with your company	///		
Date applicant ceased employment with your company	//		
Issue date of CRC/Security Clearance	//		
Expiry date of CRC/Security Clearance	//		
CRC/Security Clearance Certificate Number			
Issue date of GSAT	//		
Reason for Leaving your company			
Would you re-employ the applicant?		Yes	No
If you answered 'no', please state the reason or reason/s:			
o the best of your knowledge, is there anything known about the			
			sitive areas
o the best of your knowledge, is there anything known about the protection of the pr	ort security pass allowing the	n access to ser	sitive areas
to the best of your knowledge, is there anything known about the protherwise reflects adversely upon their suitability to hold an airpust of Gatwick Airport with another company? If you answered 'Yes' please provide the reason/s:	ort security pass allowing the	n access to ser Yes	nsitive areas



Section C: TO BE COMPLETED BY CURRENT COMPANY

Discrepancies on the form will result in the ID pass request being refused.

This section needs to be completed by an approved person directly employed with the company & whom has responsibility for staff personnel records i.e. active authorised signatory, HR representative, company director/owner.

Applicants Full Name Applicants Full Home Address ID Pass Prefix & No Job Title/..../...../....../ Date applicants employment will commence with your company CRC/Security Clearance - Has this been transferred from previous company? Yes No/...../....../ If No, please enter NEW issue date of CRC/Security Clearance CRC/Security Clearance Certificate Number/...../...../....../....../ Issue date of GSAT Please confirm if you require the applicant named in Section A to hold a dual pass with the previous employer as detailed in Section B Yes No In signing the declaration below I confirm that satisfactory 5 year references, GSAT & criminal record check/security clearance will be obtained & held on company files for audit purposes & for the duration of the ID pass. I am aware that failure to do so may result in Authorised signatory status being terminated & the ID pass issued being stopped. Company name From: Full Name Date/..../..../ Job Title Email address Contact phone number Date/..../.... Signature