

For office use only	
Work Location	
Pay	
Position	
Start Date	

# APPLICATION FOR EMPLOYMENT



**Head Office:**  
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PLEASE PRINT CLEARLY

## PERSONAL

Surname	Forename(s)
Address	Telephone number(s)  Private <span style="margin-left: 100px;">Business</span>
Postcode	Are you legally eligible for employment in the UK? YES/NO
Do you have any physical condition that could limit your ability to perform the particular job for which you are applying?  If so, please describe how you would be able to perform the job in spite of it.	
Do you have a current driving licence? YES/NO. Is it clean? YES/NO. If NO, give details:	
Have you ever been convicted of a criminal offence, other than a spent conviction under the Rehabilitation of Offenders Act 1974? YES/NO	

## EMPLOYMENT

Position applied for
Pay expected £ <span style="margin-left: 50px;">per</span>
Would you work full time? YES/NO. Part time, state days/hours
If offered this position, will you continue to work in any other capacity?
Have you previously worked for us? YES/NO. If YES, when?
On what date would you be available for work?

## EDUCATION

Schools	From	To	Examinations and results
College/University	From	To	Courses and results
Further education and formal training	From	To	Courses and results

Professional membership and qualifications

Please outline the skills and experience you have gained through paid employment and other work activities and interests that are relevant to your application of this job.

## EMPLOYMENT HISTORY

List below present and past employment, beginning with your most recent.

Name and address of employer	From		To		Starting salary	Leaving salary	Name of supervisor
	Mo	Yr	Mo	Yr	£ Per	£ Per	
	Job title:						
	Describe the work you did:						
Telephone	Reason for leaving:						
Type of business							
Name and address of employer	From		To		Starting salary	Leaving salary	Name of supervisor
	Mo	Yr	Mo	Yr	£ Per	£ Per	
	Job title:						
	Describe the work you did:						
Telephone	Reason for leaving:						
Type of business							
Name and address of employer	From		To		Starting salary	Leaving salary	Name of supervisor
	Mo	Yr	Mo	Yr	£ Per	£ Per	
	Job title:						
	Describe the work you did:						
Telephone	Reason for leaving:						
Type of business							
Name and address of employer	From		To		Starting salary	Leaving salary	Name of supervisor
	Mo	Yr	Mo	Yr	£ Per	£ Per	
	Job title:						
	Describe the work you did:						
Telephone	Reason for leaving:						
Type of business							

I hereby give permission to contact the employers listed above concerning my prior work experience.

Signed \_\_\_\_\_

If there is a particular employer(s) you do not wish us to contact, please indicate which one(s).

## PERSONAL REFERENCES

Please give details of two people (not relatives of former employers) we could approach for references.

Name	Name
Occupation	Occupation
Address	Address
Telephone	Telephone

The facts set forth in this application for employment are, to the best of my knowledge, true and complete.

Date \_\_\_\_\_ Signature \_\_\_\_\_