



APPLICATION FOR EMPLOYMENT

Confidential

Position Applied For:.....

Title:	Address:
Surname: Forenames:	
Home Tel No: Mobile No:	Email Address:
Current Driving Licence?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Any endorsements? If so what endorsements have been added?	
Schools Attended:	Grades (GCSE, CSE, O Level etc.) Maths: English: Science: Others:
College/Universities attended	Qualification and results gained:
Other training and professional qualifications gained:	
Leisure: - Please note here your interests, sports and hobbies, other pastimes etc.	

Employment History

Please start with your most recent employment first.

From – MM/YY	To- MM/YY	Name and address of Employer	Job Title & Duties	Start/Finish Salary	Reason for Leaving
Notice required in current role:					

References:

Please note here the names and addresses of two persons one of whom should be your present/last employer from whom we may obtain both character and work experience references.

Criminal Record

Please note any criminal convictions except those spent under the rehabilitation of offenders Act 1974. If none, please state.

General Comments

Please detail here your specific reasons for this application, your main achievements to date and the strength you would bring to this post.

Health Details

Do you consider yourself disabled, Yes No

If yes please detail any reasonable adjustments you are aware of that you would like the company to consider.

NOTE: If you have indicated yes we reserve the right to follow up this application with a pre-employment medical questionnaire

Please list all absences from work in the past 12 months and the reasons for such absences.

Declaration

1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. I hereby give my authority for the company to contact my own doctor for any further details of my state of health.
3. I agree that the company reserves the right to require me to undergo a medical examination in the event of my appointment.

Date:

Signed: