



# Employment Application Form

Confidential

Position Applied For:

## About You

If you need more space, feel free to attach additional sheets for any question.

First names	Surname	Sex (M/F)	Marital Status
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Nationality	Place of Birth	Date of Birth	Trade Union	National Insurance No.
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Current Address
Postcode
Telephone
Mobile Number

## Next Of Kin

To be notified in an emergency:
Name
Address
Telephone

Children:		
Date of Birth	Sex (M/F)	Name

Tick the following boxes if they apply to you:

Do you own a car?	<input type="checkbox"/>
Have you a current driving licence?	<input type="checkbox"/>

What is your driver number?	<input type="text"/>
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Date of expiry of licence	<input type="text"/>
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Which categories is your licence valid for?	<input type="text"/>
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Date PCV test passed	<input type="text"/>
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## Your Living Arrangements

Do you... (Tick one)

Rent your home	Own your home	Live with friends	Live with parents/relatives	Other (Please State)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Health

Do you smoke?	<input type="checkbox"/>	Do you drink alcohol?	<input type="checkbox"/>
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Do you have any physical disabilities?	<input type="checkbox"/>
Disabled Registration Number	<input type="text"/>
List all major illnesses during the last 5 years	<input type="text"/>
Approx. sick leave in last 5 years	<input type="text"/>

What is your height?	<input type="text"/>	What is your weight?	<input type="text"/>
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### Convictions

Please give details of any Motoring or Criminal Offence(s) for which you have been convicted during the last 10 years.

Date	Offence	Description and place of the Court	Sentence or order

### Education

School, College or Institute	From	To	Examinations taken and results achieved

### Employment History

	Present employer	1 <sup>st</sup> Previous employment	2 <sup>nd</sup> Previous Employment
Name & Address of Employer			
Type of business			
Position held			
From/To			
Reason for leaving			
Salary & Hours per week			
Contact name			

How much notice must you give your present employer?		How would you prefer to be paid?	
May we approach them for a reference?		Would you accept part time employment?	
When is most convenient for an interview?		Approximate Salary Required	

### References

One

Two

Name	One	Two
Occupation		
Address		
Telephone		
No. Of years known		

### Additional Information

Please use this space for any additional information you feel will assist us in considering your application

### Declaration

I declare that the information given is to the best of my knowledge and belief correct.

Signed:	Date:
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