

## EMPLOYMENT APPLICATION FORM

Date \_\_\_\_\_

Position applied for \_\_\_\_\_

How did you hear about the vacancy? \_\_\_\_\_

Have you applied to us before? *(Please give details)* \_\_\_\_\_

Notice required in current employment \_\_\_\_\_

**Personal Details**

Name \_\_\_\_\_

Address \_\_\_\_\_

Tel \_\_\_\_\_ Mobile \_\_\_\_\_

Date of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_

Next of Kin \_\_\_\_\_

Address \_\_\_\_\_

Tel \_\_\_\_\_

In order to ensure that our equal opportunities policy is being carried out, we would be obliged if you would provide us with the following information:

I would describe my ethnic origin as White European; African; Asian; Oriental; Caribbean; White Other; Black Other.  
*(Please circle as appropriate)*

**FOR COMPANY USE**

Initial contact made by	on
First interview held by	on
Second interview held by	on
Comments	

**Education and Experience**

Job related training, skills, etc.

Skill/Experience	Details	How Long (years)

**EMPLOYMENT APPLICATION FORM cont**

Names, addresses and dates of educational establishments attended

Name	Location	Dates

Examinations taken and results obtained

Date	Qual.	Subject	Result

Date	Qual.	Subject	Result

Any other comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please explain any breaks in employment (*use extra pages if necessary*) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please state number of days sickness in the last twelve months \_\_\_\_\_

Do you hold a current driving licence(s) Yes  No  For what? \_\_\_\_\_

Are your licences clean? Yes  No  If not, how many points? \_\_\_\_\_

For what offences? \_\_\_\_\_

Are you registered disabled? Yes  No  Number \_\_\_\_\_

What are your outside interests? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please add any further information you think may be relevant (Incl. references) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

***I confirm that the details given above are accurate and that I have not withheld any information which would affect your consideration of my application. Additionally, I accept that any offer of employment resulting from my application is subject to satisfactory references and medical examination.***

Signature \_\_\_\_\_ Print name \_\_\_\_\_ Date \_\_\_\_\_

