Application for Employment



Version 1

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	PRIVATE	AND CONFIDENTIAL		
POSITION APPLIED FOR:				
Surname	Forename(s)		Title
Address:			L	
Postcode		Telephone Number:		
NI No.				
Current driving licence? Yes/No		Details of endorsements		
Groups: Expiry D Are there any restrictions on you taking		a the LIK2	Yes 🔲	No 🗆
(If yes, please provide details)	up employment i	i tile OK:	res 🗀	NO L
EDUCATION HISTORY				
Schools (include from / to dates)		C	Qualificat	ions gained
Colleges/Universities (include from / to date	es)	Qu	alificatio	ons gained
Other training (include from / to dates)				
OTHER EMPLOYMENT				
Please note any other employment you would con	tinue with if you were t	o be successful in obtaining this position	n.	

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EMPLOYMENT HISTORY (Please complete in full and use a separate sheet if necessary)

NAME & ADDRESS OF EMPLOYER	JOB TITLE AND DUTIES	RATE OF PAY	REASON FOR LEAVING
(including from / to dates)			
Notice required in current post:			
· · · · · · · · · · · · · · · · · · ·			
REFERENCES			

Please note here the names and addresses of two persons from whom we may obtain both character and work experience references.				
2.				

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Please note here your leisure interests, sports and hobbies, other pastimes etc.
CRIMINAL RECORD
Please note any criminal convictions except those 'spent' under the Rehabilitation of Offenders Act 1974. If none please state. In certain circumstances employment is dependent upon obtaining a satisfactory basic disclosure from the Criminal Records Bureau/Disclosure Scotland.
GENERAL COMMENTS
Please detail here your reasons for this application, your main achievements to date and the strengths you would bring to this post. Specifically, please detail ho your knowledge, skills and experiences meet the requirements of this role (as summarised in the person specification).
DECLARATION (Please read this carefully before signing this application)
 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 agree that the organisation reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor). I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act.
3. I agree that should I be successful in this application, I will, if required, apply to the Criminal Records Bureau/Disclosure Scotland for a basic disclosure. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the company any offer of employment may be withdrawn or my employment terminated.
Signed: Date:
Return this form to:
The Personnel Manager Sil-Mid Limited

2 Roman Park Roman Way Coleshill West Midlands B46 1HG