

Confidential

Application for employment

(Monthly Staff)



SOFT DRINKS

POSITION APPLIED FOR.....

PERSONAL DETAILS

Surname		Forename (s)	
Address		Mobile No:	
Post Code:		Home No:	

EDUCATION AND TRAINING

Dates		School, College or University	State subjects studied and certificates gained with grades
From	To		

You will be asked to produce relevant certificates

Other relevant qualifications and training courses (with dates)

Membership of professional or technical association (if applicable)

When will you be free to commence employment?

Salary expected

EMPLOYMENT RECORD

Present employer (or last employer if currently unemployed)		
Name Address		Type of business
Starting Date		Current Salary
Job Title	Date Appointed	Date Left (if applicable)
Position(s) held and brief description of responsibilities		
Reason for leaving		
ADDITIONAL INFORMATION		
Please explain why you believe your experience, abilities and achievements make you a suitable candidate for this vacancy		

HEALTH

How many days work have you lost through illness in the last 3 years?

Give reasons

Have you had any serious illnesses, operations or accidents in the last 5 years? YES/NO If yes, please give details

Have you any medical condition which requires medication? YES/NO If yes, please give details

Do you have any illness or disability which may limit your work? YES/NO If yes, please give details

Continue on a separate sheet

Have you been convicted of any criminal offence or do you have a prosecution pending? If yes, give details (Subject to the Rehabilitation of Offenders Act).

Contact name and number in case of emergency

I understand any mis-statement on this form renders me liable to dismissal

Signed

Date

REFEREES

Please provide the names and addresses of two referees (not members of your family), one of whom should be your current or most recent employer. We will not contact your referees without prior permission.

Name

Name

Position

Position

Company

Company

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Telephone.....

Telephone.....