

Post Applied for:

Chef/ Server/ Pot-Washer/ Bar-Work/ Apprenticeships *Delete where appropriate

Latimer's of Shifnal

THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.

Section 1 Personal details

Last Name:

First Name:

Address:

Postcode:

Date of Birth:

Marital Status:

Home Telephone N^o:

Daytime Telephone N^o:

Mobile Telephone N^o:

E-mail address:

Can we contact you at work?

Yes

No

If you are successful you will be required to provide relevant evidence of the above details prior to your appointment.

Section 2 Present Employment

Present Employment (If now unemployed give details of last employer)

Name of Employer:

Address:

Postcode:

Post Title:

Date of Appointment:

Department / Section:

Brief description of duties:

Period of Notice:

Last day of service

(if no longer employed):

Reason for leaving

(if no longer employed):

Section 3 Previous Employment

Previous Employment (most recent employer first). Please state nature of business

Name of Employer:

Address:

Postcode

Position Held:

Summary of duties:

Reason for leaving:

Section 4 Education

Qualifications obtained from Schools, Colleges and Universities. Please list highest qualification first:

School	Subjects	Qualifications and grades obtained

Section 7 Health

Number of days sickness-absence in the last 2 years:

Please state number of occasions in the last 2 years:

Section 8 References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your references are.

Reference 1

Name:

Position (job title):

Work Relationship:

Organisation:

Address:

<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	<input type="text"/>

Telephone N^o:

E-mail:

Are you willing for this referee to be approached prior to the interview?

Yes

No

Reference 2

Name:

Position (job title):

Work Relationship:

Organisation:

Address:

<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	<input type="text"/>

Telephone N^o:

E-mail:

Are you willing for this referee to be approached prior to the interview?

Yes

No

Section 9 Declaration

A. Statement to be Signed by the Applicant

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I hereby certify that:

- all the information given by me on this form is correct to the best of my knowledge
- all questions relating to me have been accurately and fully answered

Signed:

Date: