

PRIVATE & CONFIDENTIAL

Position Applied for:

Date:

Working Hours Options: <u>6am-2pm/2pm-10pm/10pm-6am/12hr shifts/office hours</u> (circle your preferred options)

The information you provide will be treated in the strictest confidence.

Please complete all sections of this form. You should answer every question as fully as possible.

1. PERSONAL DETAILS			
Last Name:	Title: Mr/Mrs/Miss/Ms	Title: Mr/Mrs/Miss/Ms	
First Name:	Middle Name:	Middle Name:	
Home Address:	National Insurance Number:		
	Gender:	Gender:	
	Which ID do you have to confirm y	our	
	eligibilty to work in the UK:		
Postcode:	British Passport	YES/NO	
	UK Birth Certificate	YES/NO	
Home Tel. No.:	EEA Passport	YES/NO	
Mobile No.:	EEA Identity Card	YES/NO	
	Non-EEA Passport	YES/NO	
E-mail address:	Non-EEA Residence Card	Non-EEA Residence Card YES/NO	

2. GENERAL INFORMATION

Do you hold a current Driving Licence?		Do you have any endorsements?	
	YES/NO		YES/NO
Do you hold a current Mobile Plant licence or		Type of licence(s):	
have experience driving Mobile Plant?	YES/NO		
Have you worked for the Company before	YES/NO	What was the reason for leaving:	
Was it through the Temp Agency	YES/NO		
Are you able to work overtime, weekends, shif	twork or cor	tinental shifts if required?	
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			YES/NO
How much notice are you required to give to you			YES/NO
			YES/NO
	our present	employer?	YES/NO
How much notice are you required to give to yo	our present	employer?	YES/NO

3. HEALTH DECLARATION

Do you suffer from any medical condition or complaints, whether physical or mental, that would affect your ability to carry out the job you are applying for? **YES/NO**

If yes, are there any adjustments that we could make to the recruitment process or to enable you to fulfil the role applied for more easily?

4. EDUCATION & QUALIFIC	CATIONS			
	SECONDARY EDUCATIO	N		
Name of School	Examination Results			
	Subject	Grade		
	RTHER & HIGHER EDUCA			
Name of University / College		/ Grades Obtained		
	Subject	Grade		
	prenticeships, N.V.Q), MAI			
	ER TRAINING COURSES			
Date	Course Title			
	MEMBERSHIP OF TECHNICAL OR PROFESSIONAL BODIES			
Name of Body	Grade of Membership	Date		

5. EMPLOYMENT HISTORY			
CURRENT OR MOST RECENT POSITION:			
Name of Employer:	Date Appointed:		
Address:	Job Title & Present Salary:		
Postcode:	Reason for Leaving (if already left):		
Telephone:			
Duties & Responsibilities:			

PLEASE LIST ALL OTHER POSITIONS, BEGINNING WITH THE MOST RECENT. INCLUDING ALL PERIODS OF UNEMPLOYMENT.

INCLUDI	NG ALL P	PERIODS OF UNER	IPLOTMENT.	
Dates		Name & Address of	Position, Duties	Reason for
From	То	Employer:	Salary at point of leaving:	Leaving:

6. HOBBIES & INTERESTS

Please give details on how you like to spend your spare time.

What are you interests and hobbies?

Do you play any team sports or participate in any community work?

Are you a member of officer of any club, society or organisation?

7. INTEREST IN NEW ROLE

Please give your 3 top qualities that you can bring to our Company and give examples of where you have shown this quality before

1

2

3

Signature:

Contact/Employment

Number/E-mail	Name/Position of Contact	Position/Dates Employed
	TION	

10. ADDITIONAL INFORMATION

Where did you hear about this vacancy? Please circle as appropriate :

Company Website/Newspaper/Recruitment Agency/Employee/Friend or Family Other:

DECLARATION:

I declare that all information given on this application form is true and complete. I understand that any falsification or deliberate omissions may disqualify my application or lead to disciplinary action.

I consent to the Company using and keeping information I have provided on this application or elsewhere as part of the recruitment process and/or personal information supplied by third parties such as referees. I understand that the information provided will be used to make a decision regarding my suitability for employment and if I am employed by the company the information will be used to form my personnel record. I understand that the Company will use and retain the personal data on this form in line with the Recruitment Privacy Policy. This Policy is available to view on the Company Website at www.sweeepkuusakoski.co.uk/ucontrol/resources/privacy.pdf.

Date:

YES/NO

8. CRIMINAL RECORD DECLARATION

Have you ever been convicted of any criminal offence which is not a spent conviction under the Rehabilitation of Offenders Legislation ?

If **YES**, please give details and dates of any convictions, together with details of any penalties imposed:

Please note: It may be a requirement to apply for a conviction certificate for certain positions where security is an issue. This will show whether you have any unspent convictions. SWEEEP will bear the cost incurred in obtaining the certificate.

9. REFERENCES

Company

Name/Address/Telephone

Please give the names and addresses of two referees who are not related to you, who we can approach for a confidential assessment of your suitability for this job.

At least one of these must be a previous employer.