



APPLICATION FOR EMPLOYMENT

Private & Confidential

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Newhaven
East Sussex BN9 0AB
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www.tomsetts.co.uk

Please complete in INK and use BLOCK CAPITALS.

POSITION APPLIED FOR:.....

SURNAME:.....**FORENAME(S):**.....

ADDRESS:.....

TELEPHONE NUMBER:.....**DATE OF BIRTH:**.....

Do you hold a current driving licence?.....Have you any endorsements?.....

Have you an HGV Licence:.....Class:.....

Date HGV Licence obtained:.....

EDUCATION

Please give examination results, diplomas etc. and approximate dates of secondary education. Name of school(s):

.....

Further Education – College etc:

.....

EMPLOYMENT

Please give details of previous employment:

Employer	Position	Start date	Leaving date
1.....
2.....
3.....
4.....

.....

.....

.....

.....

Reason for leaving current employer:

.....

.....

PRACTICAL SKILLS: Summarise job skills acquired and specialist training received:

.....



What qualities do you have which most suit the job you are applying for?.....
.....

HEALTH

Are you in good health?

Please give details of any medical treatment you are currently receiving

State main causes of ill health which have resulted in time off work :

.....

Would you be willing to have a medical examination if necessary?

Is your vision or hearing impaired?

Do you have any disability or recurring health problems which may affect regular attendance at work? Please give details

GENERAL

What are your main interests, sports and hobbies?

To which clubs or societies do you belong?

Do you have any part time jobs?

Do you have any commitments which might limit your working hours e.g. Military or Local Government?

Have you been convicted of a criminal offence? YES/NO (May be discussed at interview)

Give details of all DRIVING CONVICTIONS (including drink/driving) If none, state none:

Give details of any driving offences (including drink/driving) pending for which you may be prosecuted

Has any load, part load or vehicle for which you were responsible ever been stolen?YES/NO
If YES give details.....

Give details of all road accidents in which you have been involved.....
.....
.....

REFERENCES Please give the names and addresses of two references:

One for experience: (A).....

.....

One for character: (B)

.....

Can they be contacted now? (A) (B)

Who do you know employed by our company?

.....

AVAILABILITY.

When would you be available for interview?

If offered this job, when could you start?

Do you have any holiday commitments?

DECLARATION.

Please read this carefully, then sign and date your application.

I CONFIRM THAT THE ABOVE INFORMATION IS CORRECT AND UNDERSTAND THAT MISLEADING STATEMENTS MAY BE SUFFICIENT GROUNDS FOR CANCELLING ANY AGREEMENTS MADE. I ALSO UNDERSTAND THAT QUESTIONS LEFT UNANSWERED MAY BE DISCUSSED AT INTERVIEWS ARISING FROM THIS APPLICATION.

Applicants signature

Date.

FOR OFFICE USE ONLY.

Date application sent

Driving licence number

H.G.V. licence number

Expiry date

Interview date

Interviewed by

Engaged to start