



POSITION APPLIED FOR : _____

PERSONAL DETAILS – (Please use block capitals)

Surname

Forename(s)

National Insurance Number

Address

Telephone No's: Home _____ **Mobile** _____

May we contact you at work, with discretion?

Yes

No

Do you have any special requirements which we can help you with in order to make the application process easier for you?

DRIVING HISTORY

Driving Licence No: _____

Date Test Passed: _____

PCV Licence No: _____

Date Test Passed: _____

Manual / Auto PCV Licence (Delete as appropriate)

Details of Driving Convictions / Endorsements / Disqualifications:

Details of Road Traffic Accidents in Past 3 Years:

PROFESSIONAL QUALIFICATIONS

Coach Driving:
(E.g. Certificates/Awards)

Non Coach Driving:

EMPLOYMENT HISTORY

CURRENT

Can we contact for a reference Yes No

Name of Company: _____

Address: _____

Postcode: _____

Telephone No: _____

Reason for Leaving: _____

Contact Name: _____

Period Employed From: _____

Period Employed To: _____

Position Held _____

PAST

Name of Company: _____

Address: _____

Postcode: _____

Telephone No: _____

Reason for Leaving: _____

Contact Name: _____

Period Employed From: _____

Period Employed To: _____

Position Held _____

PAST

Name of Company: _____

Address: _____

Postcode: _____

Telephone No: _____

Reason for Leaving: _____

Contact Name: _____

Period Employed From: _____

Period Employed To: _____

Position Held _____

REFERENCES

Please provide details of two persons from whom we may obtain both character and work experience references.

1.

2.

CRIMINAL RECORD

Have you ever been convicted of a criminal offence? (Declaration subject to the Rehabilitation of Offenders Act 1974)

ELIGIBILITY TO WORK IN U.K.

Do you need a work permit to work in the UK? YES NO

OTHER EMPLOYMENT

If offered this position will you continue to work in any other capacity? (If so, please provide details)

NEXT OF KIN

Please give details of next of kin or person who can be contacted in an emergency.

Name: _____
Address: _____
Relationship: _____
Telephone No: (business) _____ (home) _____

BANK/BUILDING SOCIETY DETAILS (Payroll purposes only)

Name: _____	Account No: _____
Address: _____ _____	Sort Code: _____
Post Code: _____	Investors No: (Building Socs. Only) _____
Tel. No: _____	

ADDITIONAL INFORMATION

Please provide details of any further information that you consider applicable to your application:

EQUAL OPPORTUNITIES

It is the company's policy to employ the best qualified personnel and provide equal opportunity for the advancement of employees including promotion and training and not to discriminate against any person because of race, colour, gender, religion or belief, sexual orientation, age or disability.

Applicants are requested to tick the relevant boxes below to enable the company to monitor its Equal Opportunity Policy. This information is used for no other purposes and will be treated as confidential.

GENDER:

Male

Female

ETHNIC GROUP:

White Black –Caribbean Black-Other (please specify) _____

Indian Pakistani Bangladeshi Chinese Other (please specify) _____

AGE:

To which age band do you belong?

16-19 20-24 25-29 30-34 35-39

40-44 45-49 50-54 55-59 60-65

65+

HEALTH DETAILS: Do you consider yourself to be disabled?

(The Disability Discrimination Act 1995 states that "A person has a disability for the purposes of this Act if they have a physical or mental impairment which has a substantial and long term adverse effect on their ability to carry out normal day to day activities").

Yes

No

Would any specialised aids available help you to work more effectively?

Yes

No

If yes, please specify

If you wish, you may disclose information about yourself in this section regarding your:

RELIGION:

SEXUAL ORIENTATION:

DECLARATION (Please read this carefully before signing this application)

I authorise the company to obtain references to support this application once an offer has been made and accepted and release the company and referees from any liability caused by giving and receiving information.

I confirm that the information given on this form is complete and correct and that any untrue or misleading information will be sufficient cause for rejection or if employed, dismissal.

Signature: _____

Date: _____

FOR OFFICE USE ONLY

Name: _____

Interview Date: _____ Position Offered _____

Induction Period: _____ Start Date: _____

Appearance 1 2 3 4 5

Comments:

Communication 1 2 3 4 5

Experience 1 2 3 4 5

Co-operation 1 2 3 4 5

General Impression 1 2 3 4 5
