

## PRIVATE & CONFIDENTIAL APPLICATION FORM

PLEASE COMPLETE IN BLOCK CAPITALS				
TITLE:				
SURNAME:				
FORENAMES:				
DESCRIPTION OF JOB YOU ARE A	PPLYING FC	DR:		
AVAILABILITY: TEMPORARY/ PERI	MANENT -	HOURSDAYS	)	
PERSONAL DETAILS				
HOME ADDRESS				
POSTCODE:	Pl	HONE NUMBER:		
E-MAIL:	M	OBILE NUMBER:		
NATIONAL INSURANCE No:				
HOW LONG AT THIS ADDRESS:	YEARS	MONTHS		
	EDUCAT	ION		
NAME OF SCHOOL/COLLEGE				
EXAMS OR QUALIFICATIONS -			GRADE	

PLEASE COMPLETE IN BLOCK CAPITALS						
FULL EMPLOYMENT HISTORY						
	PRESENT E	EMPLOYMENT				
NAME & ADDRESS OF COMPANY		JOB TITLE, NATURE OF BUSINESS & DUTIES				
TELEPHONE NO:						
NAME OF SUPERVI	SOR	<u> </u>				
ARE YOU STILL EM	PLOYED BY THIS COMF	PANY? YES/NO				
DATE STARTED:						
WHY DO YOU WISH TO LEAVE YOUR CURRENT JOB?						
STARTING SALARY CURRENT SALARY						
	PREVIOUS I	EMPLOYMENT				
NAME & ADDRESS OF COMPANY	JOB TITLE & DUTIES	SALARY AND REASON FOR LEAVING	FROM	ТО		
PLEASE	E CONTINUE ON PLAIN S	SHEETS OF PAPER IF	REQUIRED.			
PLEASE STATE COMPLETE EMPLOYMENT HISTORY AND REASONS FOR ANY BREAKS						
IN EMPLOYMENT. ALSO INDICATE ANY EMPLOYER YOU WOULD NOT WISH US TO CONTACT AND WHY						
DO YOU HAVE A CURRENT DRIVING LICENCE? YES/NO IS IT CLEAN? YES/NO						
IF NO PLEASE GI	IVE DETAILS					

PLEASE COMPLETE IN BLOCK CAPITALS  GENERAL DETAILS				
HAVE YOU ANY RELATIVES OR FRIENDS WORKING FOR C.W. BARSLEY & SON LTD? <b>YES/NO.</b> IF <b>YES</b> , PLEASE LIST DETAILS:				
DATES AVAILABLE TO COMMENCE EMPLOYMENT				
PLEASE STATE DATES OF ANY HOLIDAY BOOKED				
ARE YOU WILLING TO WORK IN ANY DEPARTMENT WITHIN C.W. BARSLEY & SON LTD?				
HAVE YOU PREVIOUSLY APPLIED FOR A POSITION WITH C.W. BARSLEY & SON LTD?				
LIST LEISURE INTERESTS SUCH AS HOBBIES, SPORTS AND SOCIAL ACTIVITIES:				
VOLUNTARY, PUBLIC OR PROFESSIONAL WORK UNDERTAKEN				
PLEASE ENTER HERE ANY OTHER DETAILS YOU WOULD LIKE TO SUPPORT YOUR APPLICATION:				
WHERE DID YOU SEE THIS VACANCY ADVERTISED?				

PLEASE COMPLETE IN BLOCK CAPITALS				
PERSONAL REFERENCES				
PLEASE GIVE DETAILS OF TWO PEOPLE (NOT RELATIVES OR FORMER EMPLOYERS) WE COULD APPROACH FOR REFERENCES.				
NAME	NAME			
OCCUPATION	OCCUPATION			
ADDRESS	ADDRESS			
TELEPHONE NO	TELEPHONE NO			
IN YOUR OWN HANDWRITING, PLEASE GIVE A BRIEF DESCRIPTION OF YOUR CAREER TO DATE, THE EXPERIENCE AND SKILLS THAT YOU CAN OFFER US AND WHY YOU WISH TO ENTER A CAREER WITH C.W. BARSLEY & SON LTD				
Applicants are expected to complete all parts of this form. If you wish to enlarge upon the information you have given in any section of this form, please continue on another piece of paper.  I certify, that the above information is a true and accurate record and understand that if any of the information I have provided is found to be false, C.W. Barsley & Son Ltd'., may withdraw their offer of employment or my continued employment with them, will be terminated without notice or pay in lieu of notice following a disciplinary hearing.  I understand I will be required to provide original evidence of my qualifications, grades and certificates mentioned in this application form.				
SIGNED	DATE			
OFFICE USE INT DATE.	DEC.			
INT BY.	NOTE. REF.			
REC.				