

## Application for employment

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Please complete the form as fully as possible. Please type or use black ink.

Post Title \_\_\_\_\_ Job Reference No. \_\_\_\_\_

### Personal details

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Surname:

First name(s):

Title:

Address:

Postcode

Home Tel. No:

Daytime/mobile Tel. No:

### Present (or most recent) experience

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Post held:

Employer's name and address:

Tel. No:

Nature of Business:

Period of appointment. From: \_\_\_\_\_ To: \_\_\_\_\_

Salary (basic): £ \_\_\_\_\_ per week/month/annum; allowances etc £ \_\_\_\_\_ per week/month/annum

Brief description of current duties and responsibilities:

Period of Notice required (if applicable):

Reason for leaving:

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**Previous employment (most recent first)**

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Name and address of Employer	Post held and Main Responsibilities	From	To	Reason for Leaving
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**Education (most recent first)**

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Name of School, College, University etc.	Full or Part-Time	From	To	Qualifications and Grades obtained
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## Membership of professional bodies

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Name of Professional Body	Class of Membership	Date of Admission
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## Reasons for applying

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Please give details of how your experience, skills and any training you have undertaken are relevant to this post, together with any other information in support of your application, including how your personal qualities and capabilities would benefit Stratford Tools. Please continue on a separate sheet if necessary.

## Personal development and other information

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Please give details of any personal development you have undertaken and/or any interests or voluntary work which you feel, are appropriate to your application.

## General information

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1. Do you possess a current full driving licence? YES/NO
2. Do you have regular use of a motor vehicle during the day? YES/NO
3. Do you need a Work Permit to work in the UK? YES/NO
4. Would you be prepared to work shifts? YES/NO
4. Do any of your friends or relatives work for Stratford Tools? YES/NO  
If yes, please give details .....
5. How did you hear of this vacancy? .....
6. Please give any dates when you will not be available for interview.....  
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## Referees

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Please give the names of two referees below. **One must be your present employer \*** (or most recent if you are currently unemployed) and former employers as appropriate, who can verify your employment record for the whole period of 3 years immediately preceding your application. All offers of appointment are subject to receipt of satisfactory references. [\*Normally your line manager or Human Resources Department.]

Name:	Name:
Position:	Position:
Organisation:	Organisation:
Address:	Address:
Telephone No:	Telephone No:
May we contact this referee prior to interview or appointment? YES/NO	May we contact this referee prior to interview or appointment? YES/NO

## Additional requirements

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Applications are welcomed from disabled people. Please tell us how we can remove any barriers for you in our recruitment process and at interview.

**Declaration**

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You need to declare any criminal convictions you have that are not regarded as spent under the Rehabilitation of Offenders Act 1974. Have you ever been convicted of a criminal offence? YES/NO If yes, please give details:

**In completing this application form, I understand that providing any misleading or false information in support of my application will disqualify me from appointment or, if appointed, may result in dismissal.**

Signed ..... Date .....

**Please return this form to: The General Manager, Stratford Tools Ltd. 1 Top Angel, Buckingham Industrial Estate, Buckingham, MK18 1TH. Telephone 01280 829200**