

PLEASE COMPLETE IN BLOCK CAPITALS AND RETURN APPLICATION FORM TO:

HUMAN RESOURCES DEPARTMENT, HELLERMANNTYTON UK, 1,ROBESON WAY, ALTRINCHAM ROAD, WYTHENSHAW, MANCHESTER M22 4TY.

POSITION APPLIED FOR: PREFERRED HOURS.....

SURNAME CHRISTIAN NAME(S).....MR/MRS/MISS/MS.....

ADDRESS.....

.....POST CODE.....

HOME TELEPHONE NUMBERMOBILE.....

EMAIL.....NATIONAL INSURANCE NO:.....

ASYLUM AND IMMIGRATION ACT 1997

NATIONALITY..... ARE YOU A BRITISH CITIZEN? YES/NO

DO YOU REQUIRE A WORKPERMIT? YES/NO IF YES DO YOU HAVE A WORKPERMIT YES/NO

DO YOU HOLD A FULL CLEAN DRIVING LICENSE? YES/NO

DO YOU CONSIDER YOURSELF TO BE DISABLED UNDER THE DISABILITY DISCRIMINATION ACT? YES/NO

DO YOU REQUIRE ANY PARTICULAR ARRANGMENTS FOR AN INTERVIEW? YES/NO

PLEASE GIVE DETAILS.....

.....

EQUAL OPPORTUNITIES

HELLERMANNTYTON IS AN EQUAL OPPORTUNITIES EMPLOYER AND IS COMMITTED TO MONITORING THE EFFECTIVENESS OF ITS RECRUITMENT AND SELECTION PROCEDURES. THE INFORMATION COLLECTED ON THIS FORM WILL BE USED TO MONITOR THE OPERATION OF THE EQUAL OPPORTUNITIES POLICY WHICH AIMS TO ENSURE THAT NO INDIRECT OR DIRECT DISCRIMINATION OCCURS ON THE GROUNDS OF AGE, SEX, RACE, DISABILITY, SEXUAL ORIENTATION, RELIGION OR BELIEF.

CRIMINAL RECORDS

DO YOU HAVE ANY CRIMINAL CONVICTIONS WHICH ARE NOT CONSIDERED 'SPENT' UNDER THE PROVISIONS OF THE REHABILITATION OF OFFENDERS ACT 1974? YES / NO

IF YES, PLEASE GIVE DETAILS:.....

.....

ABSENCE RECORD

NUMBER OF DAYS SICK IN THE LAST TWELVE MONTHS WITH REASONS STATED:.....

.....

.....

ANY FURTHER DETAILS YOU WISH TO GIVE: (WHY YOUR SKILLS, QUALIFICATIONS AND EXPERIENCE ARE RELEVANT TO THIS POSITION)

HOBBIES AND INTERESTS

WHERE DID YOU HEAR ABOUT THIS VACANCY?

REFERENCE

NAME:

ADDRESS:

TELEPHONE NUMBER:

REFERENCE

NAME:

ADDRESS:

TELEPHONE NUMBER:

HOW MUCH NOTICE DO YOU HAVE TO GIVE?

MAY WE APPLY FOR A REFERENCE NOW?

DATA PROTECTION ACT 1998

THE DATA CONTROLLER IS THE PERSONNEL DEPARTMENT OF HELLERMANNTYTON UK AT 1,ROBESON WAY, ALTRINCHAM ROAD, WYTHENSHAW, MANCHESTER M22 4TY
INFORMATION PROVIDED BY YOU IN RELATION TO HELLERMANNTYTON'S PERSONNEL RECORDS WILL BE PROCESSED BY OR UNDER THE INSTRUCTION OF THE PERSONNEL DEPARTMENT FOR PURPOSES APERTAINING TO YOUR EMPLOYEMNT. BY SIGNING THE DECLARATION BELOW IT IS UNDERSTOOD THAT YOU CONSENT TO THE USE OF YOUR PERSONNEL INFORMATION FOR THE STATED PURPOSE.

DECLARATION

I CONFIRM THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION GIVEN IN THIS FORM IS TRUE AND CORRECT AND CAN BE TREATED AS PART OF ANY SUBSEQUENT CONTRACT OF EMPLOYMENT. I UNDERSTAND THAT ANY APPOINTMENT OFFERED WILL BE MADE ON THE BASIS OF MY APPLICATION AND INTERVIEW AND THAT THE COMPANY RESERVES THE RIGHT TO TERMINATE MY EMPLOYMENT WITHOUT NOTICE IN THE EVENT THAT IT IS DISCOVERED THAT THE INFORMATION PROVIDED WAS NOT ACCURATE IN SOME MATERIAL WAY. I ALSO UNDERSTAND THAT ANY OFFER OF EMPLOYMENT MAY BE SUBJECT TO A SATISFACTORY MEDICAL EXAMINATION AND REFERENCES.

SIGNED _____ DATE _____

FOR OFFICE USE ONLY

DATE ACKNOLEDGED	
INTERVIEW	
CLOSING DATE	

POSITION APPLIED FOR:

CAREER HISTORY / WORK EXPERIENCE (LAST JOB FIRST PLEASE)

NAMES & ADDRESSES OF PREVIOUS EMPLOYERS	FROM TO	POSITION HELD & MAIN DUTIES	SALARY	REASON FOR LEAVING

EDUCATION & TRAINING

DETAILS OF EXAMINATIONS TAKEN, FURTHER EDUCATION, EVENING CLASSES, NVQ'S ETC.	DATES	GRADE/RESULT