



Application Form



Candidates Name: _____

Position applied for: _____

***Please complete all mandatory fields featuring an asterisk**

Information about you *

Personal Details:

Title (Mr, Mrs, Miss etc) _____

Address _____

First Name(s) _____

Surname _____

Tel no. (inc. STD code) _____

Mobile _____

Email address _____

Date of birth _____

Have you completed this form yourself? Yes No

Do you hold a valid driving licence? Yes No

Do you hold a PCV/ HGV licence (Manual/ Auto)* Yes No

Do you have any endorsements? Yes No

If so, state endorsements and dates _____

Do you hold a valid passport? Yes No

Have you ever been refused motor insurance? Yes No

If yes, please give details _____

Have you had any motor accidents in the last 5 years? Yes No Were you at fault? Yes No

If yes, please give details _____

Emergency Contact Details:

Contact Name _____

Address _____

Relationship to you _____

Tel no. (inc. STD code) _____

Mobile no. _____

Post Code _____

Employment History *

Current/ Most Recent Employment Details

Full name and address of employer

Position held _____

Date from _____

Date to _____

Notice period required _____

Contact number _____

Salary/ hourly rate _____

Additional benefits _____

Reason for leaving _____

Brief description of duties _____

Previous Employment

Full name and address of employer

Position held _____

Date from _____

Date to _____

Notice period required _____

Contact number _____

Salary/ hourly rate _____

Reason for leaving _____

Brief description of duties _____

Full name and address of employer

Position held _____

Date from _____

Date to _____

Notice period required _____

Contact number _____

Salary/ hourly rate _____

Reason for leaving _____

Brief description of duties _____

Personal References

You must provide two personal referees. These should not be relatives but could be a school/ college tutor or other professional person excluding your GP.

Name _____

Name _____

Address _____

Address _____

Post code _____

Post code _____

Telephone no. _____

Telephone no. _____

Profession _____

Profession _____

How long have you known this person? _____

How long have you known this person? _____

In what capacity have you known this person?

In what capacity have you known this person?

Please note that employment references will be sought from your last employer and after acceptance of employment, also from your current employer. The company retains the right to withdraw the offer of employment or terminate the contract of employment should unacceptable references be received. Completion of this application form will be taken as your consent to apply for references.

Immigration, Asylum and Nationality Act 2006*

Do you have the right to take up employment in the UK?

Under the Immigration, Asylum and Nationality Act 2006, you are required to provide evidence of your right to work in the UK, if called for an interview you will be advised of the documents you will need to provide which will then be checked to ensure the company complies with current legislation.

If you have a National Insurance number, please write it here _____

Town of birth _____

Country of birth _____

Rehabilitation of Offenders Act 1974*

In order to protect the public, the post you have applied for is exempt from certain provisions of the Rehabilitation of Offenders Act 1974. You are therefore required to disclose all and any past or pending cautions or convictions, whether spent or otherwise, unless it is either a "protected caution" or a "protected conviction" under the terms of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. All information provided will be kept in the strictest confidence and only used for the purpose of assessing your suitability for the post you have applied for.

Please specify below details of all and any past or pending cautions or convictions, whether spent or otherwise, except for protected cautions or convictions. If you have no past or pending cautions or convictions, please specify "None".

Vacancy Details *

Position applied for _____ Full time Part time

Where did you see the vacancy advertised? E.g. newspaper, jobcentre, other (please state) _____

Additional information

Please give the dates of any holidays or appointments booked in the next 6 months _____

Please indicate any days/ times you are unable to attend an interview _____

Availability *

Full time positions are fully flexible and include working evenings, nights and weekends.

For part time only, what are the minimum and maximum number of hours you are willing to work per week?

Min Max

For part time positions only, please indicate in every applicable box the times you are available to work.

	MON	TUES	WED	THUR	FRI	SAT	SUN
EARLY MORNINGS (e.g. starting from 3am).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MORNINGS (e.g. after 6am).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AFTERNOONS (e.g. from midday to 6pm).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EVENINGS (e.g. from 6pm to midnight).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NIGHTS (e.g. from 10pm).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Data Protection *

Upon receipt of your application form, Simonds of Botesdale Ltd will be the Data Controller of your personal data. Simonds of Botesdale Ltd will hold all the information you have given on this application form for legal requirements and for the purposes of personal administration and statistical analysis. Your information will be held on a manual file and will also be entered in its current or altered format onto the company's computerised database. No information may be passed onto a third party without your express agreement unless required by law.

Your signature on this form indicates your agreement to the above.

Declaration *

I declare that the information given in this application form is, to my knowledge, true. I understand that if it is subsequently discovered that any statement is false or misleading, my offer of employment may be withdrawn or I may be dismissed from my employment by the company without notice. I also agree to a medical examination if required.

Do you hold a valid DBS certificate? Yes No

If yes, please give the certificate number _____

If I take up employment that may involve the transportation of children and/ or vulnerable adults, I understand it may be necessary to consent to the enhanced DBS check being completed if the role requires it under the legislation.

Please tick here if you have any objection to the appropriate check being undertaken.

It must be understood that for certain jobs, a refusal may influence an offer of employment being made.

Signed.....

Date.....

Please send your completed application form to the HR Administrator at:

Simonds, Roswald House, Oak Drive, Diss, Norfolk IP22 4GX

If you have any queries relating to your application please contact us via:

Telephone: 01379 647300

OFFICIAL USE ONLY

First interview date.....

Interviewed by..... Initials.....

Second interview date.....

Interviewed by..... Initials.....

Position.....

Contracted hours.....

Start date.....

Start time.....

Start rate of pay.....

Part-time position indicate weekly schedule:

MON TUE WED THUR FRI SAT SUN

Equal Opportunities Monitoring *

Simonds of Botesdale Ltd is committed to a policy of equality of opportunity and aims to provide a working environment which is free from unfair discrimination and will enable staff to fulfil their personal potential. Simonds of Botesdale Ltd aims to ensure that no individual is unjustifiably discriminated against on the basis of gender or marital status, race, ethnic or national origin, disability, religious or political beliefs, sexual orientation, age, family circumstances or other irrelevant distinction.

Ethnic origin questions are about colour and broad ethnic groups. Regardless of your nationality, place of birth or citizenship, you can belong to any of the groups indicated. Describe your race or cultural origin by CHOOSING ONE SECTION FROM A TO E, tick the appropriate box to indicate your cultural background.

You may decide not to answer one or any of the questions on this form but if you do respond, all information provided will be treated completely confidentially and will be used solely by the Human Resources Department for the purpose of equal opportunities monitoring. The monitoring form does not form part of your job application and will therefore be detached from it on receipt and stored separately.

Name: _____ Position applied for: _____

WHITE

A1 White British A5 White Irish

A0 Any other White background, please state: _____

MIXED

B1 Mixed White & Black Caribbean

B2 Mixed White & Black African

B3 Mixed White & Asian

B0 Any other Mixed background, please state: _____

ASIAN

C1 Asian Indian C2 Asian Pakistani

C3 Asian Bangladeshi

C0 Any other Asian background, please state: _____

BLACK

D1 Black Caribbean D2 Black African

D0 Any other Black background, please state: _____

CHINESE or OTHER

E1 Chinese

E0 Any other background, please state: _____

If you are disabled, please give details of any specific arrangements and adjustments you would require to attend interview.

For the purposes of the Data Protection Act 1998, I hereby confirm that by completing this form I give my consent to the Company processing the data supplied on this form for the purpose of equal opportunities monitoring.

Signed:.....

Date:.....