



**EMPLOYMENT
APPLICATION
FORM**

POSITION APPLIED FOR:

PERSONAL DETAILS – (Please use block capitals)

| | | |
|---------|-------------|---------------------------|
| Surname | Forename(s) | National Insurance Number |
|---------|-------------|---------------------------|

Address

Telephone Numbers

Home

Mobile

May we contact you at work, with discretion?

Yes

No

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

DRIVING HISTORY

| | |
|--|------------------|
| Driving Licence Number | Date Test Passed |
| PCV Licence Number | Date Test Passed |
| Manual / Auto PCV Licence – delete as appropriate | |
| Digital Tachograph Card Number | Expiry Date |
| Certificate of Professional Competence (CPC) | Expiry Date |
| Details of driving convictions/endorsements/disqualifications: | |



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Details of Road Traffic Accidents in past 3 years:

PROFESSIONAL QUALIFICATIONS

Coach Driving: e.g. Certificates and Awards

Non Coach Driving:

EMPLOYMENT HISTORY

CURRENT

Can we contact for a reference: YES / NO

Name of Company

Contact Name

Address

Employed From / To

Postcode

Position Held

PAST

Name of Company

Contact Name

Address

Employed From / To

Postcode

Position Held

PAST

Name of Company

Contact Name

Address

Employed From / To

Postcode

Position Held

REFERENCES

Please provide the names and contact details of two people from whom we can obtain character and work experience references

1.

2.



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| | | | |
|--|-----------------|---------------------|----------|
| EQUAL OPPORTUNITIES | | | |
| <p>It is the company's policy to employ the best qualified personnel and to provide equal opportunity for employees' advancement including promotion and training and not to discriminate against any person because of race, colour, gender, religion or belief, sexual orientation, age or disability.</p> <p>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.</p> | | | |
| GENDER | | | |
| Male: | | Female: | |
| ETHNIC GROUP | | | |
| White: | Black-Caribbean | Black-Other | Specify: |
| Indian: | Pakistani: | Bangladeshi: | Chinese: |
| AGE GROUP | | | |
| 16-19 | 20-24 | 25-29 | 30-34 |
| 35-39 | 40-44 | 45-49 | 50-54 |
| 55-59 | 60-64 | 65-69 | 70 – 70+ |
| HEALTH DETAILS: Do you consider yourself to be disabled? | | | |
| Yes: | | No: | |
| <p>The Disability Discrimination Act 1995 states that: "A person has a disability for the purposes of the 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."</p> <p>Would any specialised aids available help you to work more effectively?</p> | | | |
| YES: | | NO: | |
| If YES, please specify: | | | |
| If you wish to you may disclose information about yourself regarding your: | | | |
| RELIGION: | | SEXUAL ORIENTATION: | |
| DECLARATION - Please read this carefully before signing your Application | | | |
| <p>I authorise The Company to obtain references to support this application and release the company and references from any liability caused by giving and receiving information.</p> <p>I confirm that the information given on this form is complete and correct and that any untrue or misleading information given will be sufficient cause for rejection or if employed, dismissal.</p> | | | |
| SIGNED: | | DATED: | |
| | | | |



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| | |
|--|-------------------------|
| CRIMINAL RECORD | |
| Have you ever been convicted of a criminal offence? (Declaration subject to the Rehabilitation of Offenders Act 1974) | |
| ELIGIBILITY TO WORK IN THE U.K. | |
| Do you need a work permit to work in the U.K.? 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 your next of kin or of a person who can be contacted in an emergency. Name: Address: Relationship: Telephone numbers: | |
| BANK/BUILDING SOCIETY DETAILS (Payroll purposes only) | |
| Name: | Account No: |
| Address | Sort Code |
| Postcode | Investor's No: |
| Telephone: | (Building Society Only) |
| ADDITIONAL INFORMATION | |
| Please provide details of any further information that you consider applicable to your application: | |
| FOR OFFICE USE ONLY | |
| Interviewer: | Interview date: |
| Position Offered: | Start Date: |
| Induction Period: | |
| Appearance | 1 2 3 4 5 |
| 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 |