

Employment application form

Application for employment as

Forename(s)
Surname
Address

Tel (home)
Tel (mob)
Tel (work)

Education and Training

Name of school, college etc attended	Dates	Exams passed and qualifications obtained
Schools (after age 11)		
Further education (university, college, academic or vocational evening classes)		
Professional or other training		

Employment History

Please start with your present or most recent employment and work backwards

Date From	To	Name of employer and nature of business	Position held and brief details of duties	Reason for leaving	Current or leaving pay/salary

Additional information

Do you have any disabilities that might affect your application? Please tell us if:	YES / NO
a. there are any reasonable adjustments we can make to assist you in your application	
b. there are any reasonable adjustments we can make to the job itself to help you carry it out	
Have you ever been convicted of a criminal offence? Declaration subject to the Rehabilitation of Offenders Act 1974	YES / NO
Do you need a work permit to work in the UK?	YES / NO
Have you a current clean driving licence?	YES / NO
Do you have access to a car?	YES / NO
Are you a relation of friend of anyone at Lamplas?	
How many periods of absence from work due to sickness have you had in the last 3 years? Please clarify.	
How many days of absence due to sickness have you had in the last 3 years? Please clarify.	

References

Please indicate if you do not wish us to contact either of them

A. Experience	Tel. No
B. Character	Tel. No.

Availability

When would you be available for interview?
If offered a job, when could you start?
Do you have any holiday commitments?

Notes

Use this section if you require additional space

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Declaration

Please read this carefully then sign & date your application

<p>By signing and returning this form you consent to Lamplas using and keeping information about you provided by you or by third parties, such as referees, relating to your application for future employment. You are also signing that the above information is correct and understand that if found to be false or misleading, the company will be entitled to rescind any offer of employment.</p>	Signed:	Date:
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For office use only	
Work location:	Pay:
Position:	Start date: