



APPLICATION FOR EMPLOYMENT

Position applied for		Date submitted	___/___/___
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Applications should be completed in BLOCK CAPITALS using BLACK INK (Either hand-written or typed) Completed applications should be handed to our main reception or returned by email to nick@midlandstructures.com

PERSONAL DETAILS		
Mr / Mrs / Ms / other:	Forename(s):	Surname:
Address for Correspondence:		

Post Code: _____		
Home Number: _____		
Mobile Number: _____		
Email Address: _____		

EDUCATION AND QUALIFICATIONS (MOST RECENT FIRST)			
Name of establishment	Qualification	Grade	Year Obtained





EMPLOYMENT HISTORY

This section must contain an outline of your career starting with your current, most recent employment. Please continue on a separate sheet if required.

Employer Name & Nature of Business	Position you held	Dates		Key Duties
		From	To	

What's the reason for leaving your present or most recent job?





REFERENCES

Please give the name and address of two referees. Referees will not be contacted until a provisional offer is made and accepted:

Name: _____ Job Title: _____
 Address: _____

 _____ Post Code: _____
 Telephone Number: _____
 Email Address: _____

Name: _____ Job Title: _____
 Address: _____

 _____ Post Code: _____
 Telephone Number: _____
 Email Address: _____

ADDITIONAL INFORMATION

Desired salary or hourly rate of pay: £ _____

Current notice period: _____	Available start date: _____
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Any criminal convictions (both spent & unspent)? Yes No
 If yes please provide details of any convictions below:

Do you currently hold a full clean driving licence? Yes <input type="checkbox"/> No <input type="checkbox"/> Details of Driving Convictions: _____ _____ _____ _____	Do you have any industrial claims pending? Yes <input type="checkbox"/> No <input type="checkbox"/> Details of Pending claims: _____ _____ _____ _____
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The statements given by me on this application are to the best of my knowledge and true. I understand that deliberate falsification of factual information may prejudice my application or lead to an offer of appointment being withdrawn.

Signature: _____ Date: _____