



APPLICATION FOR EMPLOYMENT

ALLOY BODIES LTD
CLIFTON STREET
MILES PLATTING
MANCHESTER
M40 8HN

APPLICATION DETAILS

Position(s) applied for _____ Date of application _____

Surname _____ First Name(s) _____

Full postal address _____

_____ Postcode _____

Phone (home number) _____ Mobile No _____

National Ins _____ Email _____

General Information:

Sex Male Female

Do you hold a clean driving licence? YES/NO

If no, list endorsements _____

Do you hold a commercial vehicle driving licence YES/NO

Date of Birth _____ Marital Status _____

Do you smoke YES/NO Do you smoke drugs YES/NO

Are you in general good health YES/NO

If No, please state your medical condition _____

Are you receiving any medical treatment YES/NO

If Yes, please state what _____

Have you in the past had periods of ill-health resulting in absence from work YES/NO

If Yes please state illness and duration _____

Are you willing to have a medical examination if required YES/NO

Are you legally eligible for employment in the UK? YES/NO

If you're not a UK or European Union national, state your permit number _____

Have you worked for this company before? YES/NO

If yes give dates and reason for leaving _____

Will you relocate if required YES/NO

Will you work overtime if needed YES/NO

Will you travel if job requires it YES/NO

Have you at any time been convicted of a crime, served a prison sentence actual or suspended? If yes give details

Skills and Qualifications

Summarise your record of training, specialist courses, qualifications and experience relevant to the position(s) you have applied for

Education Background

Name & Location of School/ College/University etc	From To	Qualification(s)	Subjects
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List any foreign language you speak _____

List any special accomplishments _____

Employment History

Give Details of your last four positions, starting with the most recent.

Employer _____ From/To _____

Employers Address _____

Contact Telephone No _____

Name of immediate Supervisor _____

Summarise the nature of your work performed and job responsibilities

Reason for leaving _____

Rate of Pay/Salary _____

Employer _____ From/To _____

Employers Address _____

Contact Telephone No _____

Name of immediate Supervisor _____

Summarise the nature of your work performed and job responsibilities

Reason for leaving _____

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Employer _____ From/To _____

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Employers Address _____

Contact Telephone No _____

Name of immediate Supervisor _____

Summarise the nature of your work performed and job responsibilities

Reason for leaving _____

Rate of Pay/Salary _____

Main Interests & Hobbies

Reference No 1

Please give details below of people who are willing to give you a reference

Delete as applicable: We can contact at any time

We can only contact if we offer you a job

Name _____

Relationship _____

Address _____

Years Known _____ Telephone No. _____

Reference No 2

Please give details below of people who are willing to give you a reference

Delete as applicable: We can contact at any time

We can only contact if we offer you a job

Name _____

Relationship _____

Address _____

—

Years Known _____ Telephone No. _____

Next of Kin

Please give details below

Name _____ Relationship _____

Address _____

Telephone Number _____

Doctors Contact Details

Doctors Name _____

Address _____

Telephone Number _____

ALL INFORMATION ON THIS APPLICATION COMPLETED BY MYSELF IS TRUE AND ANY FALSE INFORMATION COULD LEAD TO DISMISSAL IF EMPLOYED.

SIGNED _____ DATE _____