between the lines Itd

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APPLICATION FOR EMPLOYMENT

Tun'Wells Sevenoaks Petersfield Branch	Godalming Alton Reigate Warehouse Branch Branch						
Chichester Horsham Oxted Branch	Haslemere Midhurst Canterbury Driver						
<u>PE</u>	ERSONAL Date:						
Surname	Forenames Like to be called						
Address	Tel Mobile						
	I'm over the age of 16 Y/N Do you smoke ?						
	Are you legally eligible for employment in the UK?						
Email address							
The Disability Discrimination Act (2005) defines a person as disabled 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. Do you consider yourself to have a disability as defined by the Disability Discrimination Act? Yes / No Please indicate the nature of your disability and outline any adjustments to the work place you may need to assist you for the purpose of (a) the interview and (b) the job							
Do you have a current driving licence ? YES/NO Is it clean YES/NO If NO please give details							
Have you ever been convicted of a criminal offence (save for spent convictions for the purposes of the Rehabilitation of Offenders Act 1974)? If yes, please give details.							
<u>EMPLOYMENT</u>							
Position applied for	How did you find out about this vacancy?						
Pay expected £ per hour / ann	If offered this position, when could you start?						
If offered this position, will you continue to work in any othe	er capacity (i.e. other part-time jobs you may already have) and on what days?						

EMPLOYMENT HISTORY

Please list below your previous employers, starting with the most recent / current.

Name & address of employer	from	to	Starting salary	Leaving salary	Name of supervisor		
				Avera	age amount of hours worked per week		
Postcode:	Job title			/ Work	age amount of hours worked per week		
Telephone	Describe the work you did / are doing						
Type of business							
If the above address is a Head Office, please	Reasons for leaving / intention to leave						
state the location of the branch you worked at	Treasons for leaving / intention to leave						
		_					
Name & address of employer	from	to	Starting salary	Leaving salary	Name of supervisor		
	Average amount of hours worked per week						
Postcode:	Job title						
Telephone	Describe the work you did / are doing						
Type of business							
If the above address is a Head Office, please	Reasons for leaving / intention to leave						
state the location of the branch you worked at							
I hereby give permission If different please indicat		ct the emp	oloyers listed ab	ove concerning	my prior work experience.		
To the best of my knowledge and belief the information given in this application form is correct. I understand that if I am appointed and this information is inaccurate, I am liable to dismissal.							
Signed:					_		
Please complete this form fully, even if you are intending to enclose a separate CV with this application. Due to the number of enquiries we receive we are only able to contact successful applicants. We appreciate your understanding.							
Please describe your long-term am we should know in support of your				ne Lines Ltd or othe	erwise. Also, if there is anything else		

After completion please return this form to our Head Office. Thank you