**Date of Application:** Click here to enter a date.

Please answer the following questions by ticking (**x**) the relevant box.

|  |  |  |
| --- | --- | --- |
| Which position(s) you are applying for: |  |  |
| General Operative |[ ]  Quality Assurance (QA) |[ ]
| Hygiene Operative |[ ]  Engineer |[ ]
| Warehouse Operative |[ ]  Other |[ ]

If ‘Other’ please provide details: Click here to enter text.

**PERSONAL INFORMATION**

|  |  |
| --- | --- |
| Name | Click here to enter text. |
| Address | Click here to enter text. |
| Telephone Number | Click here to enter text. |
| Email Address | Click here to enter text. |
| National Insurance Number\* | Click here to enter text. |

*\*If you do not have a National Insurance Number you will need to apply for one.*

**EMPLOYMENT HISTORY**

|  |  |  |
| --- | --- | --- |
|  | **Previous Employer 1** | **Previous Employer 2** |
| Name | Click here to enter text. | Click here to enter text. |
| Address | Click here to enter text. | Click here to enter text. |
| Position | Click here to enter text. | Click here to enter text. |
| Dates Worked (From - To) | Click here to enter text. | Click here to enter text. |
| Rate of Pay | Click here to enter text. | Click here to enter text. |
| Reason for Leaving | Click here to enter text. | Click here to enter text. |

**EDUCATION / QUALIFICATIONS**

Please provide information regarding the highest qualifications you have obtained.

|  |  |  |  |
| --- | --- | --- | --- |
| **School / College** | **Date** | **Subject** | **Grade** |
|  | **From** | **To** |  |  |
| Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. | Click here to enter text. |
| **Please tick appropriate box of the following that you have achieved.** |
| **Fork Lift License** |[ ]
| **First Aid** |[ ]
| **Food Hygiene** |[ ]
| **Other... (Please give details)** | Click here to enter text. |
| **What level of English do you speak?** | [ ] **BEGINNER****INTERMEDIATE**[ ] **ADVANCED**[ ]  |

**ADDITIONAL INFORMATION**

Please answer the following questions by selecting the relevant response i.e.

* Are you over the age of 18 years old? Choose an item.
* Do you have the right to work in the UK? Choose an item.

*If ‘Yes’, please provide a copy of your documentation. This may include a scanned copy of your Visa or Passport.*

Have you ever been convicted of a criminal offence, other than a spent conviction under the Rehabilitation of Offenders Act 1974?   Choose an item. If ‘Yes’ please state here: Click here to enter text.

* Are there any adjustments that you may require to be made should you be invited to interview? Choose an item.

If ‘Yes’ please state here:

Click here to enter text.

* Do you have any allergies (*i.e. shellfish, fish, egg, milk, mustard, gluten, soya, celery, sulphites)*  Choose an item.

If ‘Yes’ please provide details: Click here to enter text.

**REFERENCES**

Please provide the name and contact details of one person who we can approach now for a reference.

|  |  |
| --- | --- |
| Name | Click here to enter text. |
| Address | Click here to enter text. |
| Telephone Number | Click here to enter text. |
| Email Address | Click here to enter text. |

**Recruitment Policy**

Our company is committed to eliminating discrimination and encouraging diversity amongst our workforce. Furthermore we recognise the responsibility of developing our employees and are committed to providing effective training and development within all areas of our business.

**Data Protection**

The information that you provide on this form will be held and processed in compliance with the General Data Protection Regulation (GDPR) and Data Protection Act 2018.

**DECLARATION OF APPLICANT**

To the best of my knowledge the information given on this form is correct. I understand that canvassing, withholding or giving false information will disqualify my application, or, if discovered after appointment, may be grounds for dismissal.

**Signature:** Click here to enter text. **Date:** Click here to enter a date.