

MARKYATE PRECISION MACHINING COMPANY LTD
Unit 1 Sharose Court, Hicks Road, Markyate. St Albans. Herts. AL3 8JH

Ref No.

CONFIDENTIAL APPLICATION FORM

It is the Company's Policy to employ the best quality personnel and provide Equal Opportunities for the advancement of employees including promotion and training and not to discriminate because of race, colour, national origin, age, sex, marital status or disability.

1. POSITION APPLIED FOR:

Are you a) Responding to an Advertisement? Yes/No
 If yes, where advertised _____
 b) Making a general enquiry to the Company about suitable vacancies? Yes/No
 Please give details _____

2. PREPARED TO WORK:

Full Time	Part Time	Shift Work	Temp
<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>

Days of the Week Available (Please Circle) Monday/Tuesday/Wednesday/Thursday/Friday/Saturday/Sunday

3. PERSONAL DETAILS:

Surname _____ First Names _____
 Address _____
 Post Code _____ Date of Birth _____
 Email _____
 Telephone (Home) _____ Mobile _____

4. EDUCATION/TRAINING: Please detail all School/College Courses taken and list any Company based Training relevant to your application.

Subjects Studied	Dates	Qualifications Achieved
	From To	

5. MEMBERSHIP OF PROFESSIONAL ORGANISATIONS Please detail below

6. Car Owner? Yes No Do you hold a current driving licence? Yes No

Do you have any current endorsements Yes / No If Yes, please specify below _____

7. CURRENT/PREVIOUS EMPLOYMENT

Please include details of your most recent employment here, and use the spaces below to give details of other employment, working backwards from the most recent.

A. Present/Previous Employer

Address

Type of Business Start Date Leaving Date

Reason for Leaving

Current/Finishing Pay £ Per Position Held

Main Duties/Responsibilities

B. Previous Employer

Address

Type of Business Start Date Leaving Date

Reason for Leaving

Position Held

C. Previous Employer

Address

Type of Business Start Date Leaving Date

Reason for Leaving

Position Held

D. Previous Employer

Address

Type of Business Start Date Leaving Date

Reason for Leaving

Position Held

If you wish to provide any additional information to support your application, please attach to this form

Are there any disabilities which may affect your application?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, please specify?			
Are there any reasonable adjustments which you feel should be made to enable you to attend an interview and/or carry out your duties in the work environment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If Yes, please specify			

9. ADDITIONAL PERSONAL DETAILS
Applicants are requested to tick the relevant boxes below to enable the Company to follow the Codes of Practice for the elimination of discrimination. This information will be treated as confidential.

Male Female

National Insurance Number _____

Which Languages do you Speak? _____

Which Languages do you Read? _____

10. HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE?
(Declaration subject to Rehabilitation of Offenders Act)
Please give details

11. HOBBIES AND INTERESTS. Please give details.

If employed by the Company, will you continue to work in any other capacity? (Give details)

If you wish to do so, please give details of next of kin or person who can be contacted in the event of an emergency.

Name Relationship

Address

Telephone Home Mobile

REFERENCES

<u>Employer Reference</u>	<u>Personal Reference</u>
Name of Company	Name
Address	Address
.....
Contact Name	Relationship
Telephone Number	Telephone Number

I authorise the Company to obtain references in support of this application once an offer has been made and accepted and release the Company and referees from any liability caused by giving and receiving information.

I confirm the information given on this form is, to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection or, if employed, dismissal.

Signature Date

PLEASE COMPLETE ALL PARTS OF THE APPLICATION FORM AND RETURN IT BY POST TO: PERSONNEL OFFICE, MARKYATE PRECISION MACHINING COMPANY LTD, UNIT 1 SHAROSE COURT, HICKS ROAD, MARKYATE, ST ALBANS, HERTS AL3 8JH OR EMAIL TO enquiries@markyateprecision.co.uk