



## EMPLOYMENT APPLICATION FORM

Please ensure all parts of the application are completed in BLOCK CAPITALS using BLACK INK

### Personal Details

Surname \_\_\_\_\_ Forename(s) \_\_\_\_\_ Mr / Mrs / Ms / Other \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_ Tel (Home) \_\_\_\_\_ Mobile \_\_\_\_\_

National Insurance No \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age (yrs) \_\_\_\_\_

Email \_\_\_\_\_

Date available to commence work \_\_\_\_\_ 2007

Available Days of Work Sat  Sun  Mon  Tue  Wed  Thu  Fri

Available Hours of Work 0900 - 1400  1400 - 1900  Other \_\_\_\_\_

### Education

School / College / Other	From	/	To	Qualifications	Grade
_____	_____	/	_____	_____	_____
_____	_____	/	_____	_____	_____
_____	_____	/	_____	_____	_____

### Employment History

Present employer	From	/	To	Position
_____	_____	/	_____	_____

Duties \_\_\_\_\_

Previous employer	From	/	To	Position
_____	_____	/	_____	_____

Duties \_\_\_\_\_

If necessary continue on separate blank sheet

### Other Relevant Info

Please detail any additional skills/experience which you feel may support your application

\_\_\_\_\_  
\_\_\_\_\_

## Health

Please indicate if you have ever suffered from any of the following

Allergies  Asthma  Diabetes  Skin Disease  Serious Ear/Nose or Throat infection  Epilepsy

Please give details of any serious illness, operations, accidents or injuries \_\_\_\_\_

\_\_\_\_\_

How many days off work / school or college have you had in the last year \_\_\_\_\_

## Criminal Record

Have you ever been convicted of a criminal record? Yes  No

If Yes, please give details (under the Rehabilitation of Offenders Act 1974, spent convictions need not be declared)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

All employees may be checked with the Criminal Records Bureau

## References

Please give below the name of two referees (not related to you) who can provide a reference.

Name \_\_\_\_\_ School/College/Company \_\_\_\_\_

Relationship to you \_\_\_\_\_

Name \_\_\_\_\_ School/College/Company \_\_\_\_\_

Relationship to you \_\_\_\_\_

## Declaration

I understand that the falsification, misrepresentation or omission of information supplied within this application form may render myself liable for dismissal and that if I am offered employment the offer will be subject to receipt of satisfactory references from the referees as advised by detailed within this application.

I also understand that you may apply to the Criminal Records Bureau for Disclosure.

I consent to the data within this application being held on record.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

If you are under 18, you must ask your parent or guardian to complete this section

Full Name \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_

## Interview notes

Interviewer's name \_\_\_\_\_

Date of Interview \_\_\_\_\_

Runamok Play & Party Centre is part of the Widebeech Group of Companies

