

**DWELLCOURT GROUP OF COMPANIES  
CONFIDENTIAL APPLICATION FOR EMPLOYMENT**

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<b>COMPANY:</b>	<b>POSITION APPLIED FOR:</b>
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**1) PERSONAL DETAILS**

Surname:	Forenames:
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Place of Birth:	Marital Status:
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National Insurance Number:
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Email Address:
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Address:	
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.....	
Post Code:	Telephone:

**2) EDUCATION**

<b>Secondary Education:</b>		
School Name & Address	Dates To/From	Education - subject/results

**Further Education & Training**

University/College	Dates To/From& Subject	Course	Qualification or Class of Degree
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**Occupational Qualification/Institute Membership**

Name of College/Institute or Other	Dates To/From	Qualification/Level
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**3) EMPLOYMENT**

Please include details of your most recent employment and complete the sections on other employment, working backwards from the most recent.

Present/Previous Employer:

Type of Business:

Address:

Start Date:

Leave Date:

Job Title:

Final Salary/Wage:

Duties/Responsibilities:

Reason For Leaving:

Previous Employer:	Type of Business:
Address:	Start Date:
	Leave Date:
Job Title:	Final Salary/Wage:
Duties/Responsibilities:	Reason For Leaving:

Previous Employer:	Type of Business:
Address:	Start Date:
	Leave Date:
Job Title:	Final Salary/Wage:
Duties/Responsibilities:	Reason For Leaving:

Previous Employer:	Type of Business:
Address:	Start Date:
	Leave Date:
Job Title:	Final Salary/Wage:
Duties/Responsibilities:	Reason For Leaving:

#### 4) RELEVANT EXPERIENCE

What do you expect the job you are interested in to involve?

Why do you think you are suited to this type of work?

#### 5) GENERAL

Hobbies/Interests:

Public Duties:

Have you ever been convicted of a criminal offence or received an official police caution for a criminal offence? (Declaration subject to the rehabilitation of Offenders Act).

**Please note** that a disclosure of a conviction or caution will not necessarily disqualify you from employment by the Company. However failure to disclose convictions or cautions affecting your employment can be a criminal offence. The Company reserves the right to discretion in these cases.

Do you require a work permit to work in the UK? YES / NO

If offered this position will you continue to work in any other capacity? (give details)

## **6) PRE-EMPLOYMENT MEDICAL QUESTIONNAIRE**

**DATA PROTECTION NOTICE:** All information disclosed will be treated in the strictest confidence, and will be used only for the purposes detailed in the Data Protection Act 1998.

Certain information is requested prior to you commencing employment with our Company, in order to ensure you are able to carry out the requirement of the job, ensure your personal safety and to meet our statutory obligations imposed by the relevant Health & Safety regulations. The information is also required to establish if we may need to make any reasonable adjustments to assist you in performing the work, in accordance with the Disability Discrimination Act 1995.

Please note: Your Doctor would not be contacted without your written consent to do so.

### **MEDICAL HISTORY**

Have you ever suffered from any of the following ailments in the past, please give details where appropriate?

- Circulatory problems such as varicose veins, phlebitis or thrombosis.
- Heart problems, angina, hypertension, or heart attack or stroke.
- Respiratory problems such as asthma or severe bronchitis.
- Diabetes.
- Epilepsy or fainting attacks.
- Skin disorders
- Recent operations or bone fractures
- Back trouble, arthritis or rheumatism.
- Injuries to bones, joint tendons, including wrist tendons.
- Are you currently on any medication?
- Have you suffered from any significant health problems including eyes, hearing, skin etc?
- Have you ever made a claim for an Industrial Disease or Injury?
- Have you worked in an industry with high noise levels or been exposed to the use of hand held vibratory tools?

Are there any disabilities which may effect your application? Yes / No

Describe disability and a) Any reasonable adjustments which you feel should be made to the recruitment process to assist in your application for the job.

b) Any reasonable adjustment which you feel should be made to the job itself which would enable you to carry out the job

**7) REFEREES**

Please give details of two referees one of whom should be your present or last employer (headmaster/tutor if you have not been in full time employment)

Name:	Name:
Address:	Address:
Occupation:	Occupation:

**8) ADDITIONAL PERSONAL INFORMATION**

Applicants are requested to tick the relevant statement below to enable the company to monitor it's equal opportunity policy. Monitoring is recommended by the Codes of Paractice for the elimination of racial discrimination and for the elimination of discrimination on the grounds of sex and marital status. This information is used for no other purpose and will be treated as confidential.

Male ..... Female .....

Ethnic Group

White ..... Black-Caribbean ..... Black-African ..... Black-Other (specify) .....

Indian ..... Pakistani ..... Bangladeshi ..... Chinese ..... Other (specify) .....

**9) RECRUITMENT POLICY**

**It is the company's policy to employ the best qualified personnel and to provide equal opportunity for the advancement of employees including promotion and training and not to discriminate against any person because of race, colour, national origin, sex , marital status or disability.**

**The Company operates and supports in certain circumstances 'Integrity Testing' and all employees may be subject to testing without notice. These test are only applied where specific problems have been indentified and Senior Management reserves the right to apply such a test on the Company premises as long as the problem exists. Senior Management refers to Company Directors only.**

**I authorise the company to obtain references to support 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.**

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

Signature ..... Date .....