



APPLICATION FOR EMPLOYMENT

PLEASE PRINT IN CAPITALS

We are equal opportunity employers – please let us know what we can do to make the application and interview process as accessible as possible. PLEASE NOTE : All applicants MUST be over 18 years of age.

The information on this form will be treated as **Strictly Confidential**. Any false information or omission of relevant information may mean the cancellation of any offer of employment or dismissal from employment if it has commenced. Please attach two passport photographs to this completed form and, if called for an interview, please bring your passport or your birth certificate or any other documentary proof that you are eligible to work in the UK.

PERSONAL DETAILS	
SURNAME:	FIRST NAMES:
POSITION APPLYING FOR: ADDRESS (IN FULL):	TELEPHONE (HOME):
	TELEPHONE (MOBILE):
POST CODE:	EMAIL ADDRESS:
NATIONAL INSURANCE NUMBER:	DO YOU HAVE ANY CRIMINAL CONVICTIONS?
YES/ NO	YES/ NO (Declaration subject to the Rehabilitation of Offenders Act 1974)
DO YOU HAVE ANY DISABILITIES THAT MIGHT AFFECT YOUR APPLICATION?	
YES/ NO	
If YES, please tell us if:	
a) there are any reasonable adjustments we can make to assist you in your application	
b) there are any reasonable adjustments we can make to the job to help you carry it out..	

NAME & ADDRESS OF NEXT OF KIN**POST CODE:****TELEPHONE:****EDUCATION****FURTHER EDUCATION, TRAINING AND SCHOOLING**

DATES		UNIVERSITY, COLLEGE, SCHOOL	TYPE OF TRAINING (DAY RELEASE, FULL TIME, EVENING)	SUBJECTS STUDIED	QUALIFICATIONS
FROM	TO				

EMPLOYMENT

(SHOW LAST/ PRESENT EMPLOYMENT FIRST, INCLUDE ANY PERIOD OF UNEMPLOYMENT OR ATTACH C.V. ENSURING THAT THE INFORMATION ASKED FOR BELOW IS COVERED)

DATES		NAME & ADDRESS OF EMPLOYER	JOB TITLE/ MAIN DUTIES	SALARY & BENEFITS	REASON FOR LEAVING
FROM	TO				

REFERENCES

WE WILL ALWAYS APPLY FOR WORK RELATED REFERENCES - YOUR CURRENT EMPLOYER WILL NOT BE CONTACTED WITHOUT YOUR PERMISSION. IN THE EVENT OF DIFFICULTIES, WE MAY ALSO ACCEPT PERSONAL REFERENCES.

NAME & ADDRESS OF TWO REFEREES (OTHER THAN RELATIVES) WHO HAVE KNOWN YOU FOR AT LEAST THE LAST TWO YEARS		
NAME	ADDRESS	OCCUPATION

OTHER INFORMATION

PLEASE DETAIL BELOW ANY FURTHER SKILLS, QUALITIES AND ABILITIES THAT YOU FEEL SUPPORT YOUR APPLICATION (E.G. KEYBOARD SKILLS, LANGUAGES AS WELL AS ANY NON-WORK RELATED ACHIEVEMENTS)

WHERE DID YOU SEE THE VACANCY ADVERTISED?

DECLARATION**DATA PROTECTION**

IF YOU ARE SUCCESSFUL IN YOUR APPLICATION, THE COMPANY WILL USE THE INFORMATION YOU HAVE PROVIDED ON THIS FORM FOR PERSONNEL RECORDS AND PAYROLL PURPOSES. WE MAY SHARE YOUR INFORMATION WITH ASSOCIATED BUSINESSES. YOU HAVE THE RIGHT TO ASK FOR A COPY OF THE INFORMATION HELD BY US AND THE RIGHT TO REQUIRE US TO CORRECT INACCURACIES IN YOUR INFORMATION. THE RETENTION OF EMPLOYEE RECORDS IS DECIDED UPON BY RELEVANT LEGAL AND BEST PRACTICE REQUIREMENTS.

IF UNSUCCESSFUL, YOUR APPLICATION FORM WILL BE RETAINED FOR A PERIOD OF 6 MONTHS AFTER WHICH TIME IT WILL BE DESTROYED. SHOULD YOU WISH TO BE CONSIDERED FOR A FURTHER POSITION AFTER THIS PERIOD YOU WOULD NEED TO RE-APPLY.

I CONFIRM THAT ALL INFORMATION SUBMITTED IS TRUE AND CORRECT, THAT THERE ARE NO MEDICAL OR OTHER REASONS THAT I KNOW OF WHICH PREVENT ME FROM UNDERTAKING THE DUTIES OF THE POST AND I UNDERSTAND THAT ANY FALSE INFORMATION OR OMISSION OF RELEVANT INFORMATION MAY MEAN THE CANCELLATION OF ANY APPOINTMENT WHICH IS ALSO MADE SUBJECT TO THE RECEIPT OF SATISFACTORY REFERENCES.

DATE:

SIGNATURE OF APPLICANT:

PLEASE RETURN COMPLETED FORM BY EMAIL TO CROYDON HALL MANAGEMENT LIMITED

info@croydonhall.co.uk