



Employment Application Form

Strictly Private and Confidential

Section 1 - Your personal information							
First name:							
	_						
Surname:							
Address:							
Postcode:							
Contact telephone:							
Next of kin:							
National Insurance Num	ber:						
Position applied for:							
As stated in the Asylur	m and Immigration	Act 1996, we	must ask for pro	oof that you are	entitled to wo	rk in the United	
Kingdom. <u>Should</u> you be	invited to attend a	ın interview, yo	u will need to brir	ng one of the follo	owing:		
	of your National Ins						
b) Passport,	work permit, certifi	cate of registrat	ion or letter of na	ituralization as a	British citizen.		
Section 2 - Licence detai	ls (if applicable)						
		Licence?		Yes	Yes No		
Do you hold a full United	d Kingdom Driving I						
If yes, please complete t	the following and b	ring the licence	along to any inter	view with you.			
Databas Bassas as	Frankric Data		Category of lic	cence held (tick a	s appropriate)		
Driving licence no.	Expiry Date	Car (A)	Motorcycle (B)	3-7 tonne (CI)	LGV (C)	LGV (C+E)	
		, ,	, , ,	, ,			
	<u>,</u>	Į.		Yes	No		
Do you hold a fork lift tr					1		
you note a fork life a decinee:					_		
If you who so complete the fellowing and bring the linear societies in 1997.							
If yes, please complete the following and bring the licence along to any interview with you.							
Forklift Cortificato		RTITB	ITSSAR	СІТВ	I _{ALTD}	1	
Forklift Certificate		KIIIB	IISSAK	CIIB	AITB	+	
List type of truck			+	-		1	
Examiner's name						-	
Authorisation number			+			4	
Attachments						4	
Date last certified							

Section 3 - Your work experience

Please provide details of your current/ previous work experience. If necessary please attach a separate sheet. In addition to the box below please feel free to enclose a copy of your Curriculum Vitae. If you have not been in paid employment, have been studying or are returning to work after a break, please take this opportunity to tell us what you have been doing during that time.

Please complete the below starting with your most <u>recent/current</u> employers. If necessary please attach another sheet with further details.

	Francisco information	Main namenalkiliki	db:
<u> </u>	Employer information	Main responsibilitie	es and achievements
Employer:			
Start date:			
Position:			
Address:			
L			1
		Length of service:	
Postcode:		Reason for leaving:	
Telephone:		Salary or wage:	
	Employer information	Main responsibilitie	es and achievements
Employer:			
Start date:			
Position:			
Address:			
Ī		Length of service:	
Postcode:		Reason for leaving:	
Telephone:		Salary or wage:	
		jesses, y es stages	
	Employer information	Main responsibilitie	es and achievements
Employer:	. ,		
Start date:			
Position:			
Address:			
F			
		Length of service:	
Postcode:		Reason for leaving:	
Telephone:		Salary or wage:	
relephone.		Salary or wage.	
Details of any 6	employment gaps in the last five years	:	
2000	simple, ment gape in the last me , care		

Section 4	Section 4 - Other information						
Please provide details of any hobbies or out of work activities and include any additional skills, qualifications or personal qualities that you believe may make you suitable for the role applied for.							
Please nro	wide a summar	ry of educational (qualifications achieved	l			•
1 10000 μ	Mac a samma.	y or coucational s	quamicacións acmeres	·•			
Date	Institution		Qualification				
	1						
Please pro	ovide us with de	etails of any crimii	nal convictions which	are not spen	t under the Reha	abilitation of Offe	enders Act 1974.
Failure to	do this may re	sult in the termin	ation of any contract				
criminal o	ffence may pre	clude you from ce	ertain job functions.				
						Yes	No
Do you ha	ive any unspen	t criminal convicti	ons in this or any othe	er country?			
						Yes	No
Do you ha	ive any court ap	ppearances or alle	eged offences pending	at this time?	?		
Date of ap	pearance:						
Name of o	court:						
Offence:							
Sentence:							
Section 5	- Declaration						
Please ch	eck that all the	answers given in	this application form	are accurate	and read the st	atements below	carefully before
signing in	agreement.						
	-		nt by Non Standard So		=	-	= -
medical questionnaire and the receipt of references given above. Non Standard Socket Screw Limited reserves the right to contact previous employers and referees for references.							
Contact pi	evious employ	ers and referees i	or references.				
I confirm that I have completed this application form fully, accurately and truthfully. I further understand that Non Standard							
Socket Screw Limited will rely upon the information given above and in any interviews and that any misstatement or untruth							
given may result in any contract or offer of employment being withdrawn.							
6 ,	,		. Gp 7				
If engaged	d, I agree to obs	serve the compan	y's rules for employee	s and terms	and conditions o	f employment.	
A					Data		
Tabblicant	s signature:	l			Date:	Ī	

Section 6 - Pre-employment medical questionnaire

Data Protection Notice: All information disclosed below will be treated in strictest confidence under 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 requirements of the job, for your personal safety and to meet our statutory obligations under relevant health and safety regulations. The information is also required to establish whether we may need to make any reasonable adjustments to assist you in performing the work, in accordance with the requirements of the Disability and Discrimination Act 1995.

ACC 1333.						
Medical history						
Are you currently or have	e you ever suffered from any of the follo	wing ailmer	its?			
			ſ	Yes	No	
•	problems such as varicose veins, phlebi lems, angina, hypertension, heart attack		bosis			
Respiratory Diabetes	Respiratory problems such as asthma or severe bronchitis Diabetes					
Epilepsy or Skin disord	fainting attacks ers					
Recent ope Back troub	erations le, arthritis or rheumatism					
Injuries to	bones, joints or tendons (including wrist	s)				
If you have answered Ye	s to any of the above please give specific	details in th	ne box below.			
				Yes	No	
Are you currently on any prescription medication?						
Have you suffered from any other significant health problems including issues with your eyes, hearing or skin?						
Have you ever made a claim for Industrial Disease or injury?						
Have you worked in an i held vibratory tools?	ndustry with high noise levels or been o	exposed to t	he use of hand-			
Applicant's signature:			Date:			

Please return the completed application form to the following address:

Mrs D. Talbot Non Standard Socket Screw Limited 360 Farm Street Hockley Birmingham B19 2TZ

Section 7 - Interview record (for internal purposes only please do not complete)				
Vacancy:				
Data				
Date:	Yes	No		
Interview?:	. es	110		
	Yes	No		
Regret letter:				
	Yes	No		
Offer letter:	V	NI-		
References received:	Yes	No		
References received.	Yes	No		
Evidence of permission to work in the UK (copy required for records):				
Interview Notes:				