



APPLICATION FOR EMPLOYMENT

BRANCH: _____

POSITION: _____

The following information is required to assess your suitability for employment and it is essential that all questions are answered correctly.

Surname:		First Names:	
Present Address:			
Post Code:			
Permanent Address: (if different)			
Post Code:			
Tel. No:		Date & Place of Birth:	
Sex: Male Female		Marital Status:	
No. of Dependent Children:		Other Dependents:	
Any physical limitations / serious illness?			
Any previous applications made? Yes No		If so, where?	
Do you hold a full Driving Licence? Yes No		Groups:	Licence No:
State your qualification/examinations and any current experience (Attach CV if available)			
Have you ever been convicted for a Criminal Offence? Yes No			
Are you over 18 years of age? Yes No			
Previous Employment (Last 2 years minimum)			
Name & Address of Previous Employer	Dates	Position	Reason For Leaving

DECLARATION BY APPLICANT

The information I have stated in this application is true to my belief and best knowledge.

If employed by the Company I agree to abide by the conditions of my contract; the Company's Employment Policy; and the working practices described in the site Health and Safety and Standard Operating Procedures (S.O.P.) file.

If employed by the Company I understand the initial 12 weeks will constitute a probation / trial period whereby my suitability for the position can be confirmed.

I agree that I am, together with the other staff members working with me, responsible for all cash and stock shortages that may occur on the shift that I am working on. Following an investigation I accept that I may be required to make good to the company my share of the total shortages on every shift that I work. I understand that any promotional items not accepted by customers must be returned to the till for re-issue.

I have read, understood and accept the above conditions.

Signed: _____

Date _____

FOR COMPLETION BY THE EMPLOYER

Date of Interview: _____

Interviewed by: _____

Suitability of Applicant: _____

Further Remarks: _____

Training Requirements: _____

Classification: Full Time Part Time Student

Pay Rate: _____ per hour per week

Starting Date: _____

P45 received and sent to Head Office: _____

National Insurance Number: _____

Applicants Declaration completed and sent to Head Office: _____

Signed by Interviewer: _____

Position: _____

