

## APPLICATION FORM

<b>POSITION APPLIED FOR:</b>	
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The following information will be treated in the strictest confidence.

### Personal

(Please complete this section in BLOCK CAPITALS)

Surname:	
First name:	
Address:	
Postcode:	
Home telephone number:	
Mobile telephone number:	

Full Driving Licence:	<b>Yes / No</b>	Endorsements:	<b>Yes / No</b>
If YES, please give further details including dates:			

Are you involved in any activity which might limit your availability to work or your working hours e.g., local government?	<b>Yes / No</b>
If YES, please give full details:	

Are you subject to any restrictions or covenants which might restrict your working activities?	<b>Yes / No</b>
If YES, please give full details:	

Are you willing to work overtime and weekends if required?	<b>Yes / No</b>
Please give details of any hours which you would not wish to work:	

Have you any convictions (other than spent convictions under the Rehabilitation of Offenders Act 1974?)	<b>Yes / No</b>
If YES, please give full details:	



# Middlegate Europe

If offered employment, you will be required to complete a Medical Questionnaire. Are you prepared to undergo a medical examination before starting employment?	<b>Yes / No</b>
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Have you ever worked for this Company before?	<b>Yes / No</b>
If YES, please give full details:	

Have you applied for employment with this business before?	<b>Yes / No</b>

Do you need a work permit to take up employment in the U.K.?	<b>Yes / No</b>
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How much notice are you required to give to your current employer?	
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## Education

Schools attended since age 11	From	To	Examinations and Results
College or University	From	To	Courses and Results
Further Formal Training	From	To	Diploma/Qualification
Job related Training Courses Name of Organisation	Date	Subject	



# Middlegate Europe

Please give details of membership of any technical or professional associations:

Please list languages spoken and the level of competence:

## Employment Details

Please give details of your past employment, excluding your present or last employer, stating the most recent first. (Please use a blank sheet of paper if more space is required.)

Name and address of employer	Dates	Position held/Main duties	Reason for leaving

## Present or Last Employer

Are you currently employed?	<b>Yes / No</b>			
Name of present or last employer:				
Address:				
Telephone number:				
Nature of business:				
Job title & brief description of duties:				
Reason for leaving:				
Length of service:	From:		To:	

Interests, Achievements, and Leisure Activities (e.g. hobbies, sports, club memberships)

Supplementary Information Please set out below any further information to support your application (e.g. past achievements, future aspirations, personal strengths)

## Declaration

I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable to summary dismissal. I understand these details will be held in confidence by the Company, for the purposes of ongoing personnel administration and payroll administration in compliance with the Data Protection Act 1998. I undertake to notify the Company immediately of any changes to the above details.

Signed:	
PRINTED:	
Date:	

## References

Please give the names of two people (one of which should be your present or most recent employer) whom we may approach for a reference.

Can we approach your current employer before an offer of employment is made? **Yes / No**

Reference 1	
Company:	
Contact Name:	
Position:	
Address:	
Tel. No:	

Reference 2	
Company:	
Contact Name:	
Position:	
Address:	
Tel. No:	

## Source of Application

How did you hear of this vacancy?