



APPLICATION FOR EMPLOYMENT

Position Applied For:	How did you hear about the position:
Surname:	
First Name:	Telephone:
Address:	Mobile Telephone:
	Email:
Town:	
Postcode:	

**Drug & Alcohol Testing:**

The Company has zero tolerance towards drugs and alcohol. We therefore operate a random Drug & Alcohol testing policy. Are you prepared to accept this policy? YES NO

**Health & Safety**

1. The Health & Safety of our Employees is our utmost priority. Whilst we take all precautions necessary to mitigate risks and make the workplace as safe as possible, it still remains a hazardous environment. Please now disclose any personal circumstances, or medical conditions, that could adversely affect the safety of yourself, and that of your colleagues- eg conditions that could make operating machinery dangerous, working at height, enclosed spaces etc.

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- 2. Are you willing to take full responsibility for your own health & safety whilst at work? YES NO
- 3. Are you willing to adhere to the Company's Health & Safety rules at all times? YES NO
- 4. Are you a registered first aider or fire marshall? YES NO
- 5. Have you had any periods of absence from work in the last 12 months? YES NO

6. If 'YES', how many? Please provide details- number of occurrences, length of each absence and the causes of each:

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7. Have you ever had an industrial claim from any previous employer? YES NO

8. If 'YES', how many? Please provide details: \_\_\_\_\_

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**Driving:**

- 9. Do you hold a full driving license? YES NO
- 10. If 'YES', what type of vehicles are you eligible to drive? Car Motorcylce PSV HGV Hi-ab

11. Please give full details of any previous bans or endorsements:

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12. If you currently have any points on your license, please state how many: \_\_\_\_\_

13. Do you hold a forklift truck license (own or in-house)? YES NO



**Other Details:**

14. What are your hobbies and interests?

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15. Please list any facts which you think may be useful when considering your application:

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16. How soon would you be available to work? \_\_\_\_\_

17. Do you have any unspent convictions or pending convictions?

If yes, please give some details-

**References:**

Please provide two professional references below:

Referee 1	Referee 2
Name:	Name:
Address:	Address:
Email:	Email:
Telephone:	Telephone:
Position:	Position:

I DECLARE, TO THE BEST OF MY KNOWLEDGE, THE INFORMATION GIVEN ON THIS FORM IS CORRECT

Signed: \_\_\_\_\_ Date: \_\_\_\_\_