

**APPLICATION FOR EMPLOYMENT**

Ensure that you complete all sections on this form. Supporting information may be attached

SURNAME:	Preferred Title: Dr/Mr/Mrs/Miss/Ms/Other
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FORENAME(S):	Preferred Title:
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**PERSONAL DETAILS**

Permanent Address:	Present address (if different):
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Home Tel:	Mobile Tel:
Nationality:	Do you require a Work Permit? Yes**/No

\*\* Please provide documentary evidence (e.g. Work Permit, Visa, Birth Certificate, Passport)

E mail address:
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Have you a current Full Driving Licence? Yes/No	Number of years Licence held:	Penalty Points (if any):
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Have you a current CITB/IPAF card? Yes/No	Type of Card: (CSCS/CPCS)	CITB Registration Number:
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**EDUCATION AND TRAINING**

Secondary School Attended	Qualifications Gained – Including Grades
Further Education – University, College	Qualifications Gained – Including Grades
Membership of Professional Bodies, Societies or Trade Unions:	

## **EMPLOYMENT DETAILS**

No reference will be made to your present employer without your consent

Present/Latest Employment Names, Address and business of employer:		
Latest position held: (Brief description of duties and responsibilities):		
Date Started:	Current/Latest Salary:	Additional Benefits e.g. Car, BUPA, etc
Reason for Leaving:		Notice Required:

## **PREVIOUS EMPLOYMENT**

Duration of Employment	1. Name, address and business of employer 2. Position held – brief description of duties and responsibilities	Reason for Leaving

Have you been convicted of any criminal offences not regarded as spent under the Rehabilitation of Offenders Act 1974. Yes / No

If Yes, please describe the offence:

Name two referees (preferably previous employers) we would have your permission to approach if necessary. This would **NOT** be done without your permission

1.

Tel:

2.

Tel:

By signing this application form, you consent to its use under the Data Protection Act 1998.

The information given on this form is, to the best of my knowledge, true and complete. Any false or misleading statements may lead to dismissal.

Signed:

Date:

Post form to: Colets Piling Ltd, The Old Village Hall, The Street, Effingham, Surrey. KT24 5JS  
or E-mail to [mail@coletspiling.com](mailto:mail@coletspiling.com)