

**Position applied for…………………………………………………………………………………….** foror……………………………………………………………………………………… for…………………………………………………………………………………………………...

**APPLICATION FORM**

## Part A Personal Details

Surname ---------------------------------------------------Forenames------------------------------------------

Date of Birth--------------------------------------------------- Nationality-------------------------------------

Address-------------------------------------------------------------------------------------------------------------

--------------------------------------------------------------------------------Postcode----------------------------

Home Telephone Number------------------------------------------- Mobile-----------------------------------

E-Mail address ----------------------------------------------------- NI no---------------------------------------

## Part B Work Permit/Visas

Do you require a work Permit? YES NO

If yes, when is the expiry date? ----------------------------------------------------------------------------

## Part C Employment History

Do you have any experience in the catering industry? YES NO

If yes, please state your last two employments starting with the most recent.

|  |  |  |
| --- | --- | --- |
| Date | Employer name & Address | Job Title |
|  |  |  |
|  |  |  |

## Part D Referees:

## Please also state two referees: Note that the following referees will be contacted and any information given shall be treated in the strictest confidence.

|  |  |  |
| --- | --- | --- |
| Referee name, address and e-mail address | Telephone / Fax | Job Title |
|  |  |  |
|  |  |  |

Turn over

## Part E Availability for work

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| Breakfast |  |  |  |  |  |  |  |
| Lunch |  |  |  |  |  |  |  |
| Dinner |  |  |  |  |  |  |  |
| All Day |  |  |  |  |  |  |  |

## Part F Qualifications and Training

|  |  |  |
| --- | --- | --- |
| From | To | Subjects and Exams Results |
|  |  |  |
|  |  |  |
|  |  |  |

Have you ever left employment or been medically retired on the grounds of ill health or unsatisfactory attendance?

YES NO

If yes, please specify.

## Part G Health

## 

I declare that the information provided in this application, to the best of my knowledge, is true and complete.

Please note that if you give any information that is false, or if you withhold any information, Catering Power Ltd may withdraw any offer of employment that has been made, or if already appointed, you may be dismissed.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date employee started: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referee checks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Part I Office use only: