



APPLICATION FOR EMPLOYMENT

Surname:	Forenames:
Title:	
Address:	Telephone:
	Mobile:
	E-mail:
Postcode:	
Nationality:	National Insurance Number:
How will you travel to work:	Do you smoke?
Do you have a full current driving licence: YES/NO	
Is it free from endorsements: YES/NO	
Have you ever been convicted of a criminal offence, other than a spent conviction under the Rehabilitation of Offenders Act 1974? YES/NO	
Have you had any operations or hospital treatment in the last 3 years? YES/NO If YES please give details:	
Do you anticipate requiring any hospital treatment in the foreseeable future? YES/NO If YES please give details:	
How many days were you off sick from work in the last year?	
<i>Under the Disability Discrimination Act employers have the obligation to make reasonable adjustments to accommodate the disabled. We are an equal opportunities employer and in order to enable us to comply with our obligations under the Act we need to know:-</i>	
<ul style="list-style-type: none">▪ Do you have any physical or mental impairment which has a substantial and long term adverse effect on your ability to carry out normal day to day activities? YES/NO	
If so, what is it:	
(Should you be invited to interview we will discuss with you the extent of any disability, the effect it might have, and what adjustments (if any) might be required to accommodate it).	

Have you previously worked for us?
If yes, when and in what capacity?
If No, have you a contact or are you related to any person in our employ? If so, please give details?

EMPLOYMENT
Position applied for :
If offered this position, will you continue to work in any other capacity? YES/NO If Yes, please give details.
Would you like to work full-time? YES/NO If your application is for part-time employment, please state days/hours preferred.
On what date would you be available to commence this employment?

EDUCATION			
EDUCATIONAL QUALIFICATIONS			
<i>Please give the name and address of the school/college/university where you attained your qualifications.</i>			
<table border="0" style="width: 100%;"> <tr> <td style="width: 40%;">Examinations undertaken</td> <td style="width: 30%;">Grade</td> <td style="width: 30%;">Year Taken</td> </tr> </table>	Examinations undertaken	Grade	Year Taken
Examinations undertaken	Grade	Year Taken	

PROFESSIONAL MEMBERSHIP & QUALIFICATIONS/SKILLS

Professional Memberships:

Qualifications:

Technical skills appropriate to the position:

EMPLOYMENT HISTORY

Present/Last employer:
Address:

Type of Business:
Position Held:
Describe the work undertaken:

Reason for leaving:

Date of employment: From _____ To _____
Starting Salary:
Final Salary:

Please give details of your two previous employers, most recent first:

Employer:
Address:

Type of Business:
Position Held:
Describe the work undertaken:

Reason for leaving:

Date of employment From _____ To _____

Starting Salary:

Final Salary:

Employer:

Address:

Type of Business:

Position Held:

Describe the work undertaken:

Reason for leaving:

Date of employment From _____ To _____

Starting Salary:

Final Salary:

REFERENCES

Please give details of two referees one of whom should be your present/last employer and not relatives). Contact will only be made with your authority.

Name:

Name:

Occupation:

Occupation:

Address:

Address:

Please send this completed form along with an up-to-date copy of your CV and covering letter to:

Miss Emily Bidwell
Human Resource Manager
Brown & Co
Old Bank of England Court
Queen Street
Norwich
Norfolk
NR2 4TA

Email: E.Bidwell@Brown-Co.com

Direct Line: 01603 598256

Mobile: 07917 804436