

Application for employment

Post applied for	
Surname:	Forenames:

Address:	Home telephone number: Business no. (if convenient): Source of application: Do you require a work permit? Yes <input type="checkbox"/> No <input type="checkbox"/>
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Education and qualifications

Schools	From	To	Examinations taken
University/College	From	To	Subjects studied - examinations taken - Results (Hons/level attained)

Technical, professional, occupational or commercial training

College/Institute	From	To	Type of training - qualification(s) gained

<u>Membership of professional bodies</u>	<u>Languages (indicate fluency)</u>

Please indicate salary requirements £ _____

Employment History

Name and address of employer	Position(s) held	Brief Description of duties	Salary - approximate	Dates employed	Reasons for leaving
Present or last employer Referee's name and position Type of business			<u>Starting (£)</u> <u>Leaving (£)</u>	<u>From</u> (month/year) <u>To</u> (month/year)	
Previous posts Referee's name and position Type of business					
Previous posts Referee's name and position Type of business					

Please continue on a separate sheet if necessary....

Previous Posts					
Referee's name and position					
Type of business					

Previous posts					
Referee's name and position					
Type of business					

Previous posts					
Referee's name and position					
Type of business					

Are you in good health? YES <input type="checkbox"/> NO <input type="checkbox"/>	Notice required by present employer
How many days absence have you had in the last two years due to illness? _____days	Have you any friends or relatives employed by SEIL? If so, name and relationship _____
If an offer of employment is made, you may be required to complete a medical questionnaire which would be sent direct to our occupational health advisor who may recommend a medical examination.	Have you applied to the organisation before? If so, approximate date: _____

Hobbies, sports, interests

Please state briefly why you have applied for this post, indicating past achievements and experience and personal qualities relevant to your application and what contribution you would expect to make to the post.
I confirm that the above information is correct to the best of my knowledge. I consent to SEIL processing, by means of a computer database or otherwise, any information which I provide them, for the purpose of employment by the company. Signature _____ Date _____
All employment is subject to the receipt of satisfactory references and , where applicable, to a satisfactory medical report.