



**access inc**

## Application Form

All information given will be treated as strictly confidential.

Please complete in Block Capitals

|  |               |
|--|---------------|
| <b>Position Applied For</b>  |               |
| <b>Last Name</b>   |               |
| <b>First Name(s)</b>   |               |
| <b>Address:</b>  |               |
| <b>Zip Code:</b>   |               |
| <b>Daytime Telephone Number:</b>   |               |
| <b>Do you hold a current driving licence?</b>  | <b>YES/NO</b> |
| <b>Details of any Driving Convictions during the last 5 years.</b>   |               |
| <b>Do you smoke?</b><br><b>(Please note that this company operates a No Smoking Policy)</b>                          | <b>YES/NO</b> |
| <b>Please give details of any serious illnesses or physical/mental impairments which may affect your application</b> |               |



## Application Form Page 2

|   |                  |   |
|---|------------------|---|
| <b>Education (Name of School)</b>                                       | <b>From – To</b> | <b>Examinations Passed &amp; Grades</b> |
| <b>Further Education<br/>(University, College, Evening<br/>Classes)</b> | <b>From – To</b> | <b>Course Details &amp; Results</b>     |

### Professional Qualifications & Memberships of Professional Bodies

### Give details of any Languages & Specialised Skills



# Application Form Page 3

| <b>Employment History<br/>(Present or most recent employer first)</b>   |   |                  |                           |                               |
|---|---|------------------|---------------------------|-------------------------------|
| <b>Name, Address,<br/>Tel No<br/>(Nature of Business)</b>               | <b>Position &amp; Main<br/>Responsibilities</b> | <b>From - To</b> | <b>Leaving<br/>Salary</b> | <b>Reason for<br/>Leaving</b> |
|   |   |                  |                           |                               |
| <b>Have you given notice to your current employer?</b>                  |   |                  |                           | <b>YES/NO</b>                 |
| <b>How soon could your new employment commence?</b>                     |   |                  |                           |                               |
| <b>Please give the name of any relations or friends working for us.</b> |   |                  |                           |                               |



## Application Form Page 4

**Please use this space for details of hobbies/interests and any other information you consider relevant (Continue on separate sheet if necessary).**

**Please give the names, addresses and telephone numbers of 2 people who may be contacted to provide references.**

**May these references be taken up immediately? YES/NO**

**Declaration:** I confirm that the information given on this form is to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection or if employed dismissal.

**Signature:**..... **Date:**.....