

PE001 b.. Issue 7 APPLICATION FORM PRIVATE AND CONFIDENTIAL

PLEASE FILL IN THIS FORM IN FULL AND DO NOT SIMPLY PUT 'SEE C.V.'

POSITION APPLIED FOR
FULL NAME
ADDRESS
POST CODETELEPHONE NUMBER
MOBILE (if applicable)
E-MAIL (if applicable)
DATE OF BIRTH
Do you have any special requirements to enable you to attend for a job interview or take up a position for which you are considered to have the minimum appropriate skills and/or experience?

Please Note: Part of the company's manufacturing process produces fumes that can cause sensitisation. The company therefore cannot employ anybody with any kind of lung function difficulty. Any job offer will be subject to the successful candidate passing the company medical when satisfactory lung function will be determined.

DO YOU HOLD A FULL CURRENT DRIVING LICENCE?	YES/NO
HOW LONG HAVE YOU BEEN DRIVING?	YEARS
HAS YOUR LICENCE BEEN ENDORSED IN THE LAST 3 YEARS?	YES/NO
HAVE YOU HAD AN ACCIDENT IN THE LAST 3 YEARS?	YES/NO

PLEASE NOTE: THIS FORM MUST BE FILLED IN COMPLETELY. DO NOT PUT "REFER TO CV".

FULL TIME EDUCATION

INSTITUTION	FROM	ТО	EXAMINATIONS TAKEN	RESULTS

PROFESSIONAL/TECHNICAL TRAINING & PART TIME EDUCATION

INSTITUTION	FROM	ТО	TITLE/ TYPE OF COURSE & SUBJECTS TAKEN?	HOW TAKEN? (E.g. day release.)	RESULTS

INTERESTS AND SPARE TIME ACTIVITIES	

EMPLOYMENT HISTORY

Start with your present or most recent employment and then work backwards. Include any service with HM Forces.

FROM	ТО	Name & Address of employer	Nature of the Company's Business	Hourly wage/annual	Reason for leaving
				salary	
YOUR					
ROLE?					
		1			1
YOUR ROLE?					
ROLE:		T	<u> </u>		1
YOUR		<u>I</u>			1
ROLE?					
YOUR		1			1
ROLE?					
YOUR					
ROLE?					
		1			1
YOUR ROLE?					
KOLE!					

PLEASE USE THE SPACE BELOW FOR ANY OTHER INFORMATION THAT YOU WOULD LIKE TO ADD.
DO YOU HAVE ANY HOLIDAYS BOOKED?
HOW MUCH NOTICE WOULD BE REQUIRED BY YOUR PRESENT EMPLOYER?
PLEASE TELL US WHY YOU THINK YOU WOULD BE AN ASSET TO THIS POSITION:

REFERENCES				
1. NAME	•••••			
ADDRESS	•••••			
	•••••			
	•••••	•••••••••••••••••••••••••••••••••••••••		
POSITION	•••••			
CONTACTABLE	•••••			
2. NAME	•••••			
ADDRESS	•••••			
	•••••	•••••••••••••••••••••••••••••••••••••••		
POSITION	•••••	•••••••••••••••••••••••••••••••••••••••		
CONTACTABLE	•••••	•••••••••••••••••••••••••••••••••••••••		
ANY JOB OFFEI DISCIPLINARY PRO	R OR YOU OCEDURE I THE INFOR	F & FALSIFICATON MAY LEAD WITHDRAWL OF UBEING ENTERED INTO THE COMPANY'S FEMPLOYED BY THE COMPANY. EMATION GIVEN ON THIS APPLICATION FORM IS BY KNOWLEDGE.		
SIGNATURE	•••••	DATE		
Thank you for filling	in this form.	BONAPRENE PRODUCTS LTD, (T/A Polybush) Clywedog Road South, Wrexham Industrial Estate, Wrexham LL13 9XS		

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