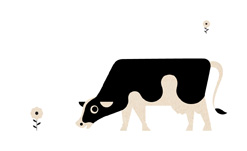
**APPLICATION FOR EMPLOYMENT**

**PRIVATE AND CONFIDENTIAL**

Please return this form to [jobs@trewithendairy.co.uk](mailto:jobs@trewithendairy.co.uk) or post to:

Job Applications, Trewithen Dairy, Greymare Farm, Lostwithiel, Cornwall, PL22 0LW.

Position Applied for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **PERSONAL DETAILS**

|  |  |  |
| --- | --- | --- |
| **Surname** | **Forename** | **Title** |
| **Address** |  |  |
| **Telephone Number** |  |  |
| **Email Address** |  |  |

1. **DRIVING DETAILS**

Current driving licence held Yes/No

For driving roles only

Details of driving licence group:

Details of any endorsements:

Expiry date of any endorsements:

1. **EMPLOYMENT IN UK**

Are there any restrictions on your taking up employment in the UK Yes/No

If yes, please provide details

1. **EDUCATION HISTORY**

|  |  |
| --- | --- |
| **Schools attended** | **Qualifications Gained** |
| **Colleges/Universities** | **Qualifications Gained** |
| **Other training** |  |

1. **EMPLOYMENT HISTORY** Please complete in full and use a separate sheet if necessary

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates from/to | Name and address of employer and contract name | Job title and brief duties | Salary | Reason for Leaving |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Notice required in current post:

Other employment

Please tell us if there is any other employment you would like to continue if you were successful in obtaining this position, or if there are commitments that would limit your availability.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **REFERENCES**

Please note here the names and addresses of two persons from whom the company may obtain both character and work experience references. One should be from your last or current employer. References will not be taken up with a current employer until an offer of employment has been made.

|  |  |
| --- | --- |
| Name and address of most recent employer | Reference may be personal character reference but referee must not be related |
| Telephone number | Telephone number |
| Email | Email |

1. **LEISURE**

|  |
| --- |
| Please note here your leisure activities, sports, hobbies etc. |

1. **CRIMINAL CONVICTIONS**

|  |
| --- |
| Please note any criminal convictions except those ‘spent’ under the Rehabilitation of Offenders Act 1974. If none please state. In certain circumstances employment is dependent on obtaining a satisfactory basic disclosure from the Disclosure and Barring Service (DBS) formally the Criminal Records Bureau (CRB). |

1. **GENERAL COMMENTS**

|  |
| --- |
| Please detail here your specific reasons for this application, your main achievements to date and the strengths you would bring to this post. |

1. **SPECIAL REQUIREMENTS**

|  |
| --- |
| Please let us know about any special arrangements you will need to be able to attend an interview. |
| Please list all absences from work in the past 12 months and the reasons for these absences.  Have you previously worked for Trewithen Dairy YES/NO  If yes please give details  Do you have any relatives working at Trewithen Dairy? YES/NO  If yes please give details |

1. **DECLARATION** (Please read this carefully before signing this declaration)

I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.

I agree that the organisation reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law required us to inform you of our intention and obtain your permission prior to contacting your doctor). I agree that this information will be retained in my personnel file during my employment and up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act.

I agree that should I be successful I will if required apply to the Disclosure and Barring Service (formally the Criminal Records Bureau) for a basic disclosure. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the company any offer of employment may be withdrawn or my employment terminated.

**Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**