



TC Harrison Group Limited

APPLICATION FOR EMPLOYMENT

CONFIDENTIAL

PLEASE COMPLETE THIS APPLICATION FORM CAREFULLY AND FULLY, AS IT WILL FORM THE BASIS OF ANY INTERVIEW WHICH YOU MAY HAVE REGARDING EMPLOYMENT WITH THIS COMPANY

Position applied for:

Location:

Salary expected:

£

per

Personal Information

Surname:

Forename(s):

Address:

Mr / Mrs / Miss / Ms (please circle)

Telephone numbers:

Home:

Business:

Do you hold a current driving licence?

Provisional / Motorcycle / Car / HGV / None

If driving is a requirement of the position applied for, please give details of any endorsements received and any road traffic accidents in which you have been involved in the last 5 years:

Education and Training

Schools	From	To	Examination and Results
College / University	From	To	Courses and Results
Further Education and Formal Training	From	To	Courses and Results

Practical Training

Please list any practical training such as an apprenticeship or computer training, etc.

Please give details of recent courses which you may have attended:

Employment History

Present / most recent employer:

From:

To:

Address:

Job Title:

Salary:

Main duties / responsibilities:

Reason for leaving:

Previous employer:

From:

To:

Address:

Job Title:

Salary:

Main duties / responsibilities:

Reason for leaving:

Employment History (continued)

Previous employer:

From:

To:

Address:

Job Title:

Salary:

Main duties / responsibilities:

Reason for leaving:

Have you at any time been employed by T C Harrison Group? YES / NO

If YES, date: from to

Location;

Position held:

Reason for leaving:

Further Information

Please give details of any other experience, interests or achievements which you consider particularly relevant to this post

Health

You may be required to attend medical examinations if you are offered employment with us. Any employment offer that we make to you may be conditional of you completing a satisfactory medical examination.

If you are offered an interview with us, are there any adjustments you would like us to make to the interview process on the grounds of your health?

Have you ever been convicted of a criminal offence? (Declaration subject to the Rehabilitation of Offenders Act)

References

Please give the names, occupations and addresses of two referees, One of the referees should be someone who can comment on your knowledge and work experience.

Referees will not be approached without your permission

Name _____	Name _____
Address _____ _____	Address _____ _____
Occupation _____	Occupation _____
Telephone No. _____	Telephone No. _____

If offered employment, when would you be available to start work?

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

Signature:

Date: