

Town & Village *Hotels*



Commer House, Tadcaster Enterprise Park, Station Road, Tadcaster, North Yorkshire LS24 9JF
 Tel: 01937 8333 11 Fax: 01937 834 236 www.commer.co.uk

APPLICATION FOR EMPLOYMENT – <i>Private and Confidential</i>
Please complete this form and return to:-

Position Applied For:	Site Name	
Surname:	First Name:	Title (Mr, Mrs Ms)
Address:		Date of Birth:
		Nationality:
Postcode:	Current (UK) Driving Licence: Yes/No	
Telephone No:		N.I Number:
Mobile Number:	Email Address:	

Are there any restrictions on you taking up employment in the UK?

Yes: (if yes provide details) _____ No:

Have you ever been convicted of a criminal offence, excluding any that are ‘spent’ under the Rehabilitation of Offenders Act? Yes (if yes give details) No:

Dates available for interview: _____

Please detail here your specific reasons for applying for this position: _____

What strengths would you bring to the Company? _____

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<i>Education History</i>		
School Name:	Subjects Taken	Qualification gained:
Colleges/Universities:		
Other Training:		

<i>Employment History</i>				
Dates From/To	Names & Address Of Employment	Job Title & Duties	Salary	Reason for Leaving

Other Employment

Please state any other employment you would continue with if you are successful in obtaining this application and the number of hours worked per week: _____

Notice Period required in current post: _____

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References

Please give the names and addresses of 2 referees from whom the Company may obtain both character and work experience references: (one should be your last employer)

1.

2.

Health Details

Do you have a physical or mental impairment which has a substantial and long term effect on your ability to carryout day to day activities?

Yes (if yes please provide details) No

Please specify any special arrangements required for work associated with any impairment:

Please specify any special arrangements you will need in order to attend an interview:

Please list any diseases, disorders, allergies, muscular and musculoskeletal injuries from which you have suffered or do suffer:

Are you registered disabled: Yes No

Declaration (please read carefully before signing this application)

1. I confirm that all the information given on this form is complete and that any untrue or misleading information will give my employer that right to terminate any employment contract offered.
2. I understand that any offer of employment is subject to satisfactory references.

Signature of Applicant _____ Date: _____