

APPLICATION FOR EMPLOYMENT

Frame Homes SW Ltd
 Jenson House
 Cardrew Industrial Estate
 Redruth
 Cornwall
 TR15 1SS

Please complete and return this form to:
 Michelle Pepper-Smith - Director

* These fields are mandatory

* Position applied for:	Timber Frame Engineer
Where did you see the position advertised?	

* Last Name:	* First name(s)
* Address:	Telephone number: Home:
	Mobile:
Single/married/ Partner/widowed/divorced	Name and address of next of kin:
* National Insurance No:	

EDUCATION DETAILS

* Names of Schools, Colleges of FE and Universities	* Examinations Passed	* Responsible Positions Held

* Are you eligible for New Deal?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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* Memberships of professional bodies:
* Other membership, e.g. JP, TA, School Boards, Governor, Councillor:



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* Leisure interests, hobbies, sports:

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* BUSINESS EXPERIENCE/SKILLS

* Do you hold a clean driving licence or licence appropriate to your profession/skills? Yes No

If no, give details:

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EMPLOYMENT DETAILS

Details are required for the last ten years. Please explain any breaks in employment (E.g education, time at home, redundancy etc).

Employer's Name and Address	Position Held and brief description of duties	Reason for Leaving	Salary/Wage
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Present:			
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Employer's Name and Address	Position Held and brief description of duties	Reason for Leaving	Salary/Wage
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<p>* Previous:</p>			
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* Explanation regarding any breaks in employment:

* HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE?
 (If yes and the criminal conviction is unspent, please give details):

* REFERENCES please give details of three referees; one your current/last employer (where possible) and two previous or character references, as appropriate.

* Name:	* Name:	* Name:
* Address:	* Address:	* Address:
Tel No:	Tel No:	Tel No:
Occupation:	Occupation:	Occupation:

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* **MEDICAL** Please check the boxes in answer to the questions

* Do you hold a current DSS linking letter BF220, BM7, BM8 or SP1(L) Form? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, please give details and dates:	
* Do you have any disabilities about which we should be aware? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please give details:	* Any serious accident/operation/illness within the last 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please give details:
Have you taken any prescribed medication in the last eighteen months? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please give details:	* Have you had any sickness for more than five days in last three years? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please give details:

DEPENDANTS

Have you any dependants? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, how many?:		
Date of Birth/Adoption 1. 2. 3. 4.	Relationship	Parental Leave taken in weeks
Have you any dependants who are disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, how many? (Give Number)		
Date of Birth/ Adoption 1. 2. 3. 4.	Relationship	Parental Leave taken in days

I certify that the information given by me on this form is accurate and that my experience is genuinely represented and qualifications claimed have been attained.



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I am aware that any engagement entered into is subject to the information being correct, the receipt of satisfactory references, and passing a medical examination, if so required by Frame Homes SW Ltd.

I understand that falsification of any information contained therein will result in immediate termination of my employment and I will have no rights of recourse.

* Signed _____ * Date _____

PERSONAL STATEMENT

Why do you think your qualifications, experience, and personal qualities make you a suitable candidate for the position? Continue on a separate sheet if necessary ensuring that you affix the sheet firmly to the application form and that your name is on the each separate sheet

Signature: _____ Date: _____

Name of Applicant (BLOCK LETTERS):



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FOR OFFICE USE ONLY

Engaged: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date rejection letter:
Job Title:	Personnel file opened: <input type="checkbox"/> Yes <input type="checkbox"/> No
Wage/Salary:	Date references applied for:
Date engagement letter sent:	Date references received:
Date Statement of Particulars sent:	1. 2. 3.
Dates Induction Training given:	

COMMENTS ON APPLICANT:

IT IS ADVISED THAT APPLICATION FORMS BE KEPT FOR THREE YEARS