



# APPLICATION FOR EMPLOYMENT

POSITION APPLIED FOR:

Other positions you would consider:

DATE OF APPLICATION:

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*IF THIS FORM IS SUBMITTED DURING A PERIOD WHEN THERE ARE NO VACANCIES FOR THE POSITION APPLIED FOR,  
IT WILL KEPT ON FILE. YOU WILL BE CONTACTED IF AND WHEN A SUITABLE VACANCY ARISES.*

## COMPLETING THIS FORM

- YOU SHOULD COMPLETE ALL SECTIONS CLEARLY IN BLOCK CAPITALS.
- INCOMPLETE OR ILLEGIBLE APPLICATIONS WILL NOT BE CONSIDERED.

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### OFFICE USE ONLY

REJECT<sup>1</sup>

KEEP ON FILE<sup>2</sup>

INTERVIEW DATE: \_\_\_\_\_

OUTCOME OF INTERVIEW<sup>3</sup>

REJECT

DATE LETTER SENT: \_\_\_\_\_

<sup>1</sup> All rejected application forms are shredded. If you wish to apply for another position it will be necessary to submit a fresh application.

<sup>2</sup> If your application is kept on file, you will be asked to attend an interview in due course

<sup>3</sup> Following interview, applicants still under consideration may be asked to work a trial shift. Unsuccessful applicants will be contacted by letter

**JOB OFFER:**

**REFUSED**

**ACCEPTED**

**INDUCTION DATE:**

.....

.....

# PERSONAL INFORMATION

SURNAME: ..... FIRST NAMES: .....

ADDRESS: .....

..... POSTCODE: .....

NATIONALITY ..... DATE OF BIRTH: .....

MOBILE: NO. .... LANDLINE: .....

*Do you have a full valid Driving Licence?*       YES       NO

*Do you have regular use of a vehicle?*       YES       NO

*If 'NO', how do you plan to travel to and from work?*

.....

*Are you required by law to have a work permit?*       YES       NO

*If 'NO', on what basis are you currently permitted to live and work in the UK?*

.....

*Are you a member of a professional organisation or association? If yes, please give details below:*

.....

*What skills or abilities do you have that will be relevant to this job?*

.....

.....

*What hobbies and interests do you have outside work?*

.....

*Are you fluent in any foreign languages?*       YES       NO

*If yes, please give details below:*

.....

# EDUCATION

SCHOOL/COLLEGE/UNIVERSITY	FROM	TO	QUALIFICATIONS GAINED

*OTHER RELEVANT QUALIFICATIONS, COURSES OR AWARDS*

DATE	DETAILS

**STUDENTS**

DATE YOU EXPECT TO COMPLETE YOUR COURSE:

## AVAILABILITY

DATE AVAILABLE TO START:

PERIOD OF NOTICE:

Hospitality is a 24/7 industry – the hotel is open every day of the year. Are there any times when you will be unable to work?

Do you have any holidays booked in the next 3 months? *[please give dates below]*

**EMPLOYMENT**

PLEASE PROVIDE DETAILS OF YOUR EMPLOYMENT HISTORY.\_

NAME & ADDRESS OF EMPLOYER	FROM	TO	JOB TITLE & DUTIES	REASON FOR LEAVING

**WE MAY CONTACT YOUR PREVIOUS EMPLOYERS IF YOU ARE BEING CONSIDERED FOR AN INTERVIEW.  
HOWEVER, NO INFORMATION WILL BE SOUGHT FROM YOUR CURRENT EMPLOYER WITHOUT YOUR CONSENT.**

## REFERENCES

PLEASE SUPPLY THE CONTACT DETAILS OF **TWO** REFEREES. NOTE THAT ONLY *ONE* OF THESE SHOULD BE A CHARACTER REFERENCE.

WORK REFERENCE	CHARACTER REFERENCE

## GENERAL

Have you been convicted of any criminal offences that are not yet spent under the Rehabilitation of Offenders Act 1974?

YES:  NO:

If yes please give details below *(DO NOT INCLUDE PARKING FINES OR MINOR SPEEDING OFFENCES)*

ANY ADDITIONAL INFORMATION IN SUPPORT OF YOUR APPLICATION.

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.....

## CONTACT IN CASE OF AN EMERGENCY

NAME: .....

TEL No: ..... RELATIONSHIP: .....

ADDRESS: .....

## HEALTH

Do you have any condition that may affect your ability to do this job?

Are you currently receiving any medical treatment or taking any medication that may affect your ability to do this job?

Have you ever been refused employment on medical grounds?

If you have answered "yes" to any of the above questions please give details below.  
[continue on a separate sheet if necessary]

NAME & ADDRESS OF YOUR DOCTOR:

I confirm that I will be able to produce the following documentation prior to employment commencing.  
(tick all that apply)

- |   |                                      |   |   |
|---|--------------------------------------|---|---|
| <input type="checkbox"/> P45  | <input type="checkbox"/> NI number   | <input type="checkbox"/> British birth certificate  | <input type="checkbox"/> British passport |
| <input type="checkbox"/> Letter from Inland Revenue/Benefits Agency which includes my name and NI number          |                                      |   |   |
| <input type="checkbox"/> P60  | <input type="checkbox"/> old payslip | <input type="checkbox"/> Certificate of citizenship | <input type="checkbox"/> ID card          |
| <input type="checkbox"/> Letter issued by the Home Office/DFEE confirming permission to take employment in the UK |                                      |   |   |

## DECLARATION

I confirm that the information given on this form is correct and true and has no deliberate omissions. I understand that any false statement or suppression of material may result in the cancellation of any appointment that is made.

Unless otherwise indicated on this form, I hereby authorise the company to obtain references as necessary to support my application, and release the company and referees from any liability caused by giving and receiving information.

Furthermore, I understand the Company's duty under the Asylum and Immigration Act 1996 to ensure that all employees have leave to enter, remain and take up employment in the UK and accept that an offer of employment is also subject to my providing the necessary evidence in connection with this.

I agree I will undergo a medical examination if asked to do so.

**SIGNED:** .....

(Applicant)

**DATE:** .....