


<b>APPLICATION FOR EMPLOYMENT</b> <u>APPRENTICE</u> <b>Please complete ALL sections in INK and use BLOCK CAPITALS</b>	Please return completed form to: <b>THOMAS ARMSTRONG (HOLDINGS) LIMITED</b> Workington Road, Flimby, Maryport, Cumbria CA15 8RY Tel. 01900 68211	 <b>Form F12</b> <b>Issue 5 07/11</b> <b>Double A4</b> <b>Page 1</b>
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<b>Surname:</b>		<b>Forenames:</b>	
Mr/Mr/Miss/Ms			
Address:		Name & Address of Next of Kin:	
Telephone No:		Telephone No:	
Date of Birth:		Relationship:	
Age:	Trade Applied for:	National Insurance No:	
Name, Address & Occupation of two responsible persons to whom you are not related and from whom a reference may be obtained:  A.		Do you own a car? Yes/No	
		Have a current driving licence?	
		Yes <input type="checkbox"/> No <input type="checkbox"/> Provisional <input type="checkbox"/>	
		Driving licence No:	
		.....	
B.		Have you any endorsements? Yes/No	
		If yes give reasons.....	
		.....	
		When would you be available for interview?	
		Do you have any holiday commitments?	
		Do you have any part time jobs? (If yes, give details)	
Doctor's Name & Address:		Are you willing to work shifts?	
		Are you willing to work overtime?	
Height:		Who do you know employed by this company?	
Weight:			
Please describe your smoking habits: - .....			
Have you ever been convicted of a criminal offence? (Declaration subject of the Rehabilitation of Offenders Act 1974) If yes please give details:			
Nationality: ..... Passport Number ..... 1. Have you been ordinarily resident in the UK or a country in the European Union for the whole of the last 3 years? Yes / No 2. If you are not ordinarily resident in the UK, please write your country of residence ..... 3. If you are not a British Citizen, when did you enter the UK? ..... / ..... / .....			
Ethnic Origin: This section is required to enable us to comply with the code of practice for the elimination of racial discrimination. Please tick the appropriate box.			
<input type="checkbox"/> Black-Caribbean		<input type="checkbox"/> Indian	
		<input type="checkbox"/> White	

<input type="checkbox"/> Black-African	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Chinese
<input type="checkbox"/> Black- Other (please specify)	<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Other - please specify

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**EDUCATION**

Name and Address of School	From	To	Examinations taken & results

**RELEVANT EXPERIENCE:**

Have you done any Saturday work or newspaper rounds? Yes/No (give details)

Any other paid employment whilst you were at college/school? Yes/No (give details)

Have you done any voluntary work? Yes/No (give details)

Have you completed a course of training under the Youth Training Scheme (YTS) or any other government training scheme? Yes/No (give details)

**GENERAL**

Interest/hobbies: (Give details of pastimes, sports, etc.)

Offices held in social/sports clubs, etc.

**ADDITIONAL INFORMATION**

**DECLARATION** **Please** read this carefully, then sign and date your application.

I confirm that the above information is correct and understand that misleading statements may be sufficient grounds for cancelling any agreements made. I also understand that questions left unanswered may be discussed at interviews arising from this application.

Applicants Signature:

Date: