

Application for employment

FleetEurope

Please complete this document in your own handwriting by printing clearly in black ink.

Surname	
Title	

Forenames	
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Address	
Postcode	

Private ☎	
Business ☎	
Date of Birth	

Nationality	
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How will you travel to work?	
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Please note, to enable us to comply with our obligations under the Asylum and Immigration Act, you will be asked to provide written proof of your right to work in the United Kingdom, before any job offer is made to you. You will be given details of the original document(s) which are required at the appropriate time.

Do you have a full current driving licence?	YES/NO
Is it free of endorsements?	YES/NO (If NO, give details):

Have you ever been convicted of a criminal offence, other than a spent conviction under the Rehabilitation of Offenders Act 1974? YES/NO
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Do you smoke?		National Insurance No.	
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Please give details of any special interests or hobbies.
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Have you a contact or are you related to any person in the employ of FleetEurope plc? If so, please give details.

Employment

Position applied for		Pay expected	£	per
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If offered this position, will you continue to work in any other capacity?	YES/NO (If yes, please give details)
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On what date would you be available to commence this employment?	
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Education

Educational qualifications

Examinations Undertaken	`O'Level GCSE/ `A'Level/ `AS'Level/ or equivalents	Grade	Year Taken
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Please give name & address of school/college/university where you attained your qualifications:

Professional membership & qualifications

Please list:

Employment history

Present/Last Employer:		Date of Employment from:	
Address:			
Starting Salary:		Final Salary:	
Type of Business:		Position Held:	
Describe the work undertaken:			
Reason for Leaving:			

Please give details of your two previous employers, most recent first.

Employer:		Date of Employment from:		To:	
Address:					
Starting Salary:		Final Salary:			
Type of Business:		Position Held:			
Describe the work undertaken:					
Reason for Leaving:					

Employer:		Date of Employment from:		To:	
Address:					
Starting Salary:		Final Salary:			
Type of Business:		Position Held:			
Describe the work undertaken:					
Reason for Leaving:					

References

Please give details of two referees (one of whom should be your present/last employer and not relatives). Contact will only be made with your authority.

Name		Name	
Occupation		Occupation	
Address		Address	

Please outline the skills and experience you have gained through paid employment and other work activities and interests which are relevant to your application for this job.

Please use this space to give any other information you feel is necessary to support your application including your reasons for applying to FleetEurope plc and what skills or benefits you can bring.

Disability

Do you consider yourself to have a disability? YES/NO

If yes, please give details.

How can we assist with any special needs to enable you to attend interview or carry out your duties?

If your application is successful, you may be asked to consent to FleetEurope plc verifying the information you have given in this form.

Sign and date the declarations and authorisation below:

I declare that the information given by me, to the best of my knowledge, is true and complete.

I acknowledge that dishonesty or the giving of incorrect information on purpose may render this application and any subsequent employment invalid and subject to summary termination.

In accordance with the Data Protection Act 1998, I hereby authorise FleetEurope plc to process the information contained in this application form for recruitment and selection purposes.

Name (Block capitals)	
Date	
Signed	