

THE SWAN  
EAST ILSLEY  
APPLICATION FORM

PLEASE USE BLOCK LETTERS THROUGHOUT

JOB APPLIED FOR

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WHEN ARE YOU AVAILABLE TO START

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In order to give your application full consideration would you please complete the enclosed questions

MR / MRS/ MISS	
First Name	

Surname	
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DATE OF BIRTH

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AGE NOW

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NATIONAL INSURANCE NO :

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Please tell us a telephone number where you can be contacted:

day time	
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Evening	
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NEXT OF KIN

NAME

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NAME

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ADDRESS

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ADDRESS

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POST CODE

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POST CODE

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EMPLOYERS NAME & ADDRESS	DATES		REASON FOR LEAVING	WAGE
	FROM	TO		

LIST OF PREVIOUS EMPLOYMENT HISTORY BELOW

EMPLOYERS NAME & ADDRESS	DATES		REASON FOR LEAVING	WAGE
	FROM	TO		

THE COMPANY RESERVES THE RIGHT TO CONTACT PREVIOUS EMPLOYERS FOR REFERENCES

LIST ANY SPECIAL QUALIFICATIONS YOU HAVE

ARE YOU A QUALIFIED FIEST AID PERSON

Y/N

HOW WILL YOU TRAVEL TO AND FROM WORK

HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENCE ? OR HAVE A CASE PENDING ?  
Y/N IF YES GIVE DETAILS

HAVE YOU ANY RELATIVES OR FRIENDS WORKING FOR US Y/N  
IF YES WHOM?  
WHERE?

HAVE YOU WORKED IN THIS PUB BEFORE Y/N  
IF YES PLEASE GIVE DETAILS

HAVE YOU EVER WORKED IN LICENSED PREMISES BEFORE ? Y/N  
IF YES PLEASE GIVE DETAILS

Position DATE EMPLOYED -  
FROM / TO

HAVE YOU EVER HANDLED CASH WITH CUSTOMERS BEFORE ? Y/N  
IF YES PLEASE GIVE DETAILS

HAVE YOU EVER SERVED DRINK OR FOOD TO CUSTOMERS BEFORE?

Y/N

IF YES PLEASE GIVE DETAILS

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HAVE YOU HAD ANY TRAINING WITH OTHER COMPAINIES ON  
CUSTOMER CARE AND SERVICE ?

Y/N

IF YES, PLEASE GIVE DETAILS

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#### WORKING TIMES

Opening hours may very each day Monday to Sunday if you could choose the hours you wanted to work what would they be

please write them below next to the day

MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	
SATURDAY	
SUNDAY	

Are there any days or times that you definitely would nnot be able to come to work ?

(e.g weekend/ bank holidays/ school holiday) if **YES** please give details :-

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to the best of my knowledge the information I have given is complete and correct.

I agree that any misrepresentation made by me will result in the cancellation of my application and termination of any employment with the company.

Signed:

Date

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FOR OFFICIAL USE ONLY

Interviewed by:

Date

Comments :