

APPLICATION FOR EMPLOYMENT

1. Position for which application is made

.....Date:

2. Personal Details

SurnameTitle.....(Mr/Mrs/Ms/other)

Forename/s(underline preferred name)

Address

.....Post code:.....

Home Tel No..... Mobile.....

Age..... Date of Birth.....

Nationality.....

National Insurance Number.....

Please state if you suffer from any disability?.....

If so are you a registered disabled person? YES/NO

Have you suffered from any serious illness in the past? If so please give details.....

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Are you a smoker? YES/NO (please note our offices are a non-smoking environemnt)

Do you have a current full driving licence? YES/NO

Details of any driving offences/endorsements.....

Do you have your own transport? YES/NO

Have you ever been convicted of any criminal offence or are you currently subject to any criminal proceedings? (excluding motoring offences which did not result in disqualification) YES/NO

If yes, give details

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Depending on the job role we may carry out a credit search at our discretion, or apply to the Criminal Records Bureau. Would you have any objections? YES/NO

3. Education/Technical Training

Schools attended:

Dates attended:

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.....
.....

Examinations passed:

Dates:

.....	Grade.....
.....	Grade.....
.....	Grade.....
.....	Grade.....
.....	Grade.....
.....	Grade.....
.....	Grade.....

University/Colleges attended:

Dates attended:

.....
.....

Details of Degree, Diplomas or Certificates obtained:

Dates:

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Membership of Professional associations.....

Other training/short courses:

Dates:

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.....

4. Previous and present employment (over the last 10 years)

(Please start with your present/most recent occupation)

Dates from and to: Position held: Employer:
.....

Brief description of duties: Reason for leaving:
.....

Dates from and to: Position held: Employer:
.....

Brief description of duties: Reason for leaving:
.....

Dates from and to: Position held: Employer:
.....

Brief description of duties: Reason for leaving:
.....
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Present annual salary £..... Bonus (if any) £.....

Date of last salary increase..... Other earnings (if any) £.....

Benefits (if any)

Have you ever been subject to formal disciplinary action? YES/NO If yes, please give details:

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.....

Have you ever had any complaints made against you? YES/NO If yes, please give details:

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.....

5. Additional remarks

Please give full details of any other skills, knowledge or experience which would support your application:

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Details of insurance experience (please provide evidence of insurance CPD activity)

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Please give details of your spare time interests/hobbies:

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.....

6. Salary, and date available

Minimum salary required £.....Date available.....

7. Referees

Please give names and addresses of two referees who have knowledge of your business and/or professional competence, one of whom must be your most recent employer. These will not be contacted without your permission.

1.	2.
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I confirm that to the best of my knowledge the information provided is correct and gives a fair representation of my qualifications and employment history. I understand that the company may use the information contained in this form for the purposes of monitoring its equal opportunities policy and the effectiveness of its recruitment procedures and consent to this use.

Signature:..... **Date:**.....