



PLEASE FILL IN EACH SECTION TO THE BEST OF YOUR ABILITY ENSURING THAT YOU GIVE ALL THE DETAILS REQUESTED. DO NOT FORGET TO FILL THE BACK PAGES.

POSITION APPLIED FOR: FT or PT

TICK DAYS YOU CAN WORK

DAYS AM PM

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

SUNDAY

NAME:.....

PRESENT ADDRESS:

.....

PERMANENT ADDRESS IF DIFFERENT TO ABOVE:.....

.....

TELEPHONE NUMBER HOME:..... MOBILE:.....

NATIONALITY:.....

NATIONAL INSURANCE NUMBER:.....

DATE OF BIRTH:.....

PLACE OF BIRTH:.....

MARITAL STATUS:..... NO OF DEPENDANTS:.....

DO YOU HOLD A VALID, CLEAN DRIVING LICENCE YES/NO

DO YOU HAVE ANY CRIMINAL CONVICTIONS YES/NO

CATERING EXPERIENCE: (IF NONE, PLEASE GIVE ANY WORK EXPERIENCE)

DATES EMPLOYED	NAME OF EMPLOYER	POSITION HELD	REASON FOR LEAVING

WHAT WAS YOUR LAST PAY RATE?

WHAT DO YOU ENJOY MOST ABOUT WORKING IN CATERING?

.....

WHAT DO YOU ENJOY LEAST ABOUT WORKING IN CATERING?

.....

WHY DO YOU WANT TO WORK FOR THIS COMPANY?

.....

PLEASE SUPPLY THE NAMES OF TWO WORK REFERENCES

1. NAME:.....

2. NAME:.....

POSITION:.....

POSITION:.....

COMPANY ADDRESS:.....

COMPANY ADDRESS:.....

.....

.....

.....

.....

.....

.....