JOB APPLICATION FORM

PRIVATE AND CONFIDENTIAL

Return this form to: Road Traffic Solutions 60-64 Oswald Road Scunthorpe North Lincolnshire DN15 7PQ





Position Applied For Internal / External (please circle)											
Title:			Surname:				F	orename(s	s):		
Tel numbers (please	e include)		Address:				E-mail address:				
Home:											
Work:											
Mobile:											
Modilo.			Postcode:								
Current driving licence? Yes/No			If you have any current				Are there any restrictions on you taking up				
			endorseme	ents ple	ase list		W	ork in the	UK/Visa?	Yes/No	(If yes please
Groups:			below:				provide details below)				
Expiry Date:											
Size required for Hi-Visibility PPE if applicable (please circle, if other use far right column)						<u>n</u> n)					
T Shirt	S	М	L	XL	2XL	3XI	L				
L.Sleeve Vest	S	M	L	XL	2XL	3XI	L				
Sweatshirt	S	М	L	XL	2XL	3XI	L				
Bomber Jacket	S	M	L	XL	2XL	3XI	L				
Waterproofs	S	М	L	XL	2XL	3XI	L				
Waist (inches)	30	32	34	36	38	40)	42	44		
Trouser Length	Short	Regular	Long]
Boot Size	6	7	8	9	10	11		12	13		
Gloves	L	XL									
Education/Further Education Qualifications gained											

Employment History (Please complete in full using a separate sheet if necessary, starting with your most recent employment and give reasons for any gaps in employment)						
From – To	Name & Address of employer	Job Title & Duties	Salary on leaving	Reason for leaving / notice period required		

Qualifications gained

Other Training

References

Position:	Please provide details of two referees who can p one of whom must be your present or most recer academic referee.				
Organisation: Address: Postcode: Telephone Number: May the company approach the above prior to the interview? Yes / No Please attach a copy of your most recent C.V. for our perusal along with a cover letter detailing your reasons for this application, it should highlight where you have demonstrated the requirements set out in the job advertisement throughout your prior experiences, whilst also describing your management style. Cautions, Rehabilitation and Criminal Records Do you have any unspent criminal or driving convictions that we need to be made aware of? If Yes please state relevant information below:-	1. Name:	2.	Name:		
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	Failure to disclose any unspent conviction				

Other Employment

Please note any other employment you would continue with if you were to be successful in obtaining this position.					

Declaration (Please read carefully before signing this application)

1.	I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2.	Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor. I agree that the organisation reserves right the right to require me to undergo a medical examination. In addition, I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act.
Sigr	ned:
Date	ə: