



Please complete this form and return to
Door Stop International Ltd
 Export Drive, Huthwaite, Notts, NG17 6AF.
 Tel: (01623) 446336 Fax: (01623) 553892

APPLICATION FORM

Position Applied For

Last Name.....	First Name.....
MR / MRS. / MISS/ MS. (Please Circle)	Nationality.....
Address:	
Post Code.....	Evening Telephone Number.....
Daytime Telephone Number.....	E-Mail address.....
National Insurance Number.....	Are you registered disabled? YES / NO

Do you own transport?	YES / NO	Are you in good health?	YES / NO
Do you hold a current driving licence?	YES / NO	Please detail any disability, serious illness or operations with dates.	
Please indicate the type of licence. (Please Circle)		
PROVISIONAL	FULL	HGV	Are you at least 18 years of age YES / NO
OTHER (please state below)			(Say yes if you are 18 within the next three months)
			Are you eligible to work in the UK? YES / NO

EDUCATION AND TRAINING

Secondary Education – Name of School / College	Examinations Passed
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.....
.....
.....
.....

Other Courses / Company Training you have attended	Dates
.....
.....
.....

Are you prepared to work: Continental Shifts 2 shift pattern Part time
 (if available) Full time days Full time nights 3 shift pattern

PLEASE GIVE DETAILS OF YOUR CAREER HISTORY – STARTING WITH YOUR PRESENT OR LAST EMPLOYMENT

Name and Address of Employer.....

Brief Description of Duties.....

Date Started

Date Left

Salary

Reason for Leaving.....

Starting £.....

Finishing £.....

EMPLOYMENT PREVIOUS TO ABOVE

Name and Address of Employer.....

Brief Description of Duties.....

Date Started

Date Left

Salary

Reason for Leaving.....

Starting £.....

Finishing £.....

Name and Address of Employer.....

Brief Description of Duties.....

Date started

Date Left

Salary

Reason for Leaving.....

Starting £.....

Finishing £.....

Name and Address of Employer.....

Brief Description of Duties.....

Date Started

Date Left

Salary

Reason for Leaving.....

Starting £.....

Finishing £.....

PLEASE GIVE DETAILS OF YOUR HOBBIES, SPORTS AND PASTIMES.

PERSONAL REFEREES

Current / last employers will be contacted for a reference but not until an offer has been made and accepted.

Name.....	Name.....
Relationship.....	Relationship.....
Address.....	Address.....
.....
.....
Occupation.....	Occupation.....
Telephone Number.....	Telephone Number.....

HAVE YOU ANY RELATIVES OR FRIENDS, PAST OR PRESENT WORKING FOR THE COMPANY? IF SO PLEASE GIVE DETAILS

Name.....	Name.....
Address.....	Address.....
.....
.....
Relationship.....	Relationship.....

I authorise the company to obtain references to support this application and release the company from any liability caused by giving and receiving information.

Declaration: I confirm that the information given on this form is complete and accurate to the best of my knowledge and belief. Incorrect information may be sufficient cause for rejection or if employed, dismissal.

Signature.....
Date.....

FOR OFFICE USE ONLY

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Interviewer's use only:	Other comments
Ability to perform role 1 2 3 4 5	
Appearance 1 2 3 4 5	
Communication skills 1 2 3 4 5	
Name of interviewer:	Signature:
Position:	Date interviewed: