

MANIC MONSTERS LTD.

EMPLOYMENT APPLICATION FORM

POSITION APPLIED FOR: _____

The following information will be treated in the strictest confidence.

PERSONAL

(Please complete this section in BLOCK CAPITALS)

Surname:		First Name(s):		
Address:				
			Postcode:	
Contact Tel. No:	Mobile Telephone No:	Email:		
Full Driving Licence:	YES/NO	Endorsements:	YES/NO	
<i>If YES, please give further details including dates</i>				
Are you involved in any activity which might limit your availability to work or your working hours e.g. local government?			YES/NO	
<i>If YES, please give full details.</i>				
Are you subject to any restrictions or covenants which might restrict your working activities?			YES/NO	
<i>If YES, please give full details</i>				
Are you willing to work overtime and weekends if required?			YES/NO	
Please give details of any hours which you would not wish to work:				
Have you any convictions (other than spent convictions under the Rehabilitation of Offenders Act 1974)?			YES/NO	
<i>If YES, please give full details</i>				
Have you ever worked for this Company before?			YES/NO	
<i>If YES, please give full details:</i>				
Have you applied for employment with this Company before?			YES/NO	
Do you need a work permit to take up employment in the UK?			YES/NO	
How much notice are you required to give to your current employer?				

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EDUCATION

Schools (Name & Address) attended since age 11	From	To	Examinations and Results
College or University (Name & Address)	From	To	Courses and Results
Further Formal Training (Name & Address)	From	To	Diploma/Qualification
Job related Training Courses (i.e. First Aid) Name of Organisation	Date	Subject	

Please give details of membership of any technical or professional associations:

Please list any languages spoken and the level of competence:

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EMPLOYMENT DETAILS

Please give details of your employment covering the last 5 years, excluding your present or last employer, stating the most recent first (please continue on additional sheets if necessary).

Name and address of employer	Dates	Position held/Main duties	Reason for leaving

PRESENT OR LAST EMPLOYER

Are you currently employed? YES/NO

Name of present or last employer:			
Address:			
Telephone No:			
Nature of business:			
Job title and a brief description of your duties:			
Length of Service:	From:	To:	
Reason for Leaving			

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DECLARATION

I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable to summary dismissal. I understand these details will be held in confidence by the Company, for the purposes of assessing this application, ongoing personnel administration and payroll administration (where applicable) in compliance with the Data Protection Act 1998.

Signature:	Date:
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REFERENCES

Please give the names of two people (one of which should be your present or most recent employer) whom we may approach for a reference. Can we approach your current employer before an offer of employment is made?
YES/NO

Name:	Name:
Job Title and Name of Company:	Job Title and Name of Company:
Address:	Address:
Tel. No:	Tel. No:

SOURCE OF APPLICATION

How did you hear of this vacancy?

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EQUAL OPPORTUNITIES

Please tick the **ONE** Ethnic Origin box that applies to you:

White

- British
 Irish
 Other white background

Mixed

- White and Black Caribbean
 White and Black African
 White and Asian

Chinese or other ethnic group

- Chinese
 Other
 Other mixed background

Asian or Asian British

- Indian
 Pakistani
 Bangladeshi
 Other Asian background

Black or Black British

- Caribbean
 African
 Other Black background

Birth Nationality: please tick one

- British
 Other (please specify)

Current Nationality: please tick one

- British
 Other (please specify)