

# APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION Date of Application:			
Name:			
Last	First	Middle	
Permanent Address: Street	City	Country	
Position(s) applying for:			
Phone No. (Home):	_ Мо	bile	
Email Address:	NIC numbe	r	
Date of birth (dd/mm/yy):	_ Marital Stat	tus:	
Sex: 🔲 Male 🛄 Female	No. of Depe	endent:	
Next to Kin:			
Name Addres	s Tel	ephone number	
Do you have a valid driver's license: 🔛 Yes 🦳 No	State years of experi	ence:	
Have you ever been imprisoned or convicted? (If yes give	ve reason(s)		
Are you involved in any (social, sporting etc.) activities?			
State days and hours you are available for work:			
Are you available on holidays? 🔲 Yes 🔲 No			
Present/ most recent monthly salary:	Expected Mo	onthly Salary:	

# **EDUCATION**

School Name and Location	Years of Schooling	Subjects of study	Degree or Grades obtained
High School			
College or university			
Specialized Training Trade School etc.			
Other Education			

# PREVIOUS EXPERIENCE

State two most recent places of employment or school attended, reason for leaving and contact number:

1)	
2)	
-,	

If all the above information is true and legitimate please sign:

# Employment Reference Form

# To be completed by former employer:

Applicant name:	
Applicant Job Title:	
Applicant D.O.B:	

# Please answer all questions honestly and accurately:

Specific dates of employment: (Please use exact dates)	From: (DD/MM/YYYY)	To: (DD/MM/YYYY)	
Job title:			
Nature of work, Specific duties, responsibilities:			
Reason for leaving employment?			
If dismissed please supply details:			
Was applicant honest and trustworthy at all times?			
Yes No If no please supply full details:			

During employment was applicant the subject of a Disciplinary	
procedure	
Yes:	
No:	

If yes, please supply full details and outcome	
Would you re-employ applicant?	
Yes	
No If no, please state reasons why:	
Do you have any other information you feel would be relevant to an employer?	

# Please tick which box accurately applies to the applicant:

General Conduct	Excellent	Good	Satisfactory	Below Average	Poor
Ratings					

# Student Reference Form

Candidate's Name:	
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Date: \_\_\_\_\_

Reference Name/Phone Number \_\_\_\_\_\_

Reference Position/school: \_\_\_\_\_

# **Questions**

How long have you known this individual and in what capacity?		
Has this individual ever been suspended or expelled from school? (If yes, give reason for your answer).		
How well did this individual got along with students/teachers?   Very well good Average		
Compared to other students would you rank this individual in the :		
Bottom 1/3 Middle 1/3 Top 1/3		
Would you have any reservations about recommending this individual to an employer?	Yes	No

Signature of referee: \_\_\_\_\_