

Employment Application Form

PRIVATE AND CONFIDENTIAL



Position Applied For

Crew member Customer Care Assistant Other _____

Personal Details

Forename/s _____ Surname _____
 Address _____

 Postcode _____
 Telephone No. (home) _____ Telephone No. (mobile) _____
 Email address _____ National Insurance No. _____
 Are you of school leaving age? YES NO
 How far do you live from the restaurant? _____ How would you get to and from work? _____
 Have you worked for McDonald's before? YES NO
 If 'YES', which restaurant(s)? _____
 Date(s): From _____ To _____ Reason(s) for leaving _____
 How did you hear about the job? _____

Next of Kin

Name _____ Relationship _____
 Address _____ Telephone No. (home) _____
 _____ Telephone No. (mobile) _____
 Post Code _____

Your Availability

Please indicate the times when you are available to work

Shifts	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Anytime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early mornings 6-8am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mornings 8-2pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoons 2-6pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evenings 6-12am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nights 12am onwards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How many hours would you wish to work each week? _____ Could you work extra hours if required? YES NO
 Are you looking for Temporary or Full-time employment? If temporary, when are you available? From _____ To _____
 Please indicate when you would be available to start work _____
 Please specify any dates, when you would NOT be available for interview _____

Present and Previous Employment

Please include work experience details

Employment dates	Name & address of employer <small>Please include full postal address and tel. no.</small>	Job title & duties	Reason for leaving

Do you have another job? YES NO
 If offered a position with McDonald's, will you continue to work for your other employer? YES NO
 If YES, please give details of days and hours currently being worked? _____
 If you have no previous employment please give details of who to contact for a personal or educational reference

General Education and Training



School/College/University	Subjects	Examinations/Awards/Achievements

About You



What do you like to do in your spare time? (include details of any interests or membership of clubs and societies)

What is your proudest accomplishment to date? _____

Diversity Development

McDonald's is committed to the equality of opportunity in employment. The company is committed to monitoring its Diversity Policy in respect of job applicants and employees in accordance with the Codes of Practice issued by the Commission for Racial Equality, the Equal Opportunities Commission and the Code of Practice relating to the Disability Discrimination Act. Employees will have access to their recorded data. Please answer the questions below, by ticking the appropriate boxes. This information is used for monitoring purposes only.

Ethnic Origin - I would describe my Origin as:

Black Origin Afro-Caribbean (A) African (B) Black Other (C) *please specify* _____

Asian Origin Indian Sub-Continent (D) Chinese (E) Asian Other (F) *please specify* _____

White Origin European (inc. UK) (G) White Other (H) *please specify* _____

Gender Male (M) Female (F)

Marital Status Single (S) Married (M) Divorced (D) Widowed (W)

McDonald's seeks to offer employment opportunities irrespective of physical or mental disabilities wherever possible, and will make any reasonable adjustments to ensure that disabled people can compete equally with non-disabled people.

Do you consider yourself to have a disability that is relevant to the job for which you are applying? YES NO

If 'yes' please give brief details of the effects of the disability and any assistance you would need:

a) to attend an interview _____

b) to enable you to perform the job, if successful _____

Criminal Convictions



Have you ever been convicted of a criminal offence?

YES NO

If "YES", please give details (under the Rehabilitation of Offenders Act 1974, spent convictions need not be declared)

Health



Have you now or over the last seven days suffered from diarrhoea, vomiting or skin infection? YES NO

Have you ever had or are you known to be a carrier of typhoid or paratyphoid and/or in the last 21 days have you been in contact with anyone suffering from either of those illnesses? YES NO If 'Yes' please give details (use a separate sheet and attach to this form).

Declaration



The contents of the form are confidential. If you are successful it will form the basis of your records held by the Company. I consent to the company recording my data and disclosing information contained on this form to third parties in order to assess this application, any subsequent employment and any matter relating to that employment. I also consent to the company contacting my present and/or previous employer or work experience provider for a reference. I understand that before any offer of employment is made, I must provide the company with confirmation of my eligibility to work in the UK. I certify that the information on this form is, to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection or, if employed, dismissal.

Applicant's signature _____ Date _____