

TARGET CATERING EQUIPMENT/PEDRETTE ENGINEERING LTD

Application for Employment

The Employer is an Equal Opportunity Employer, which makes employment decisions regarding prospective qualified employees without regard to race, colour, sex, religion, national origin, age, disability, marital status or sex change status or any other factor protected by law.

PLEASE PRINT AND ANSWER ALL QUESTIONS

Position applied for: _____ DATE: _____

Where did you hear about this vacancy: _____

PERSONAL DATA

Surname _____ First names _____

Address _____

Telephone number _____

Do you require a work permit to take up employment in the U.K.? Yes No

Date of birth: _____ Place of birth: _____ Nationality: _____

Describe any specialised training, skills, or experience which you believe are relevant to the job you are applying for:
I confirm that the information given in this application is correct
Signature of Applicant Date

EDUCATION AND TRAINING:

Name & location of education establishment	Course of study/ qualifications	Date: from	Date: to	Qualifications earned (results)

Continue onto a separate page if necessary.

**EMPLOYMENT
HISTORY**

Please give an accurate, complete full-time and part-time employment record. Attach additional sheets if necessary.

Employer's name (current name): _____ Telephone no.: _____

Has this employer performed business under another name in the past? Yes No

If yes, what are the names known to you? _____

Address: _____

City: _____ County: _____ Post code: _____

Name of supervisor: _____ Dates employed: From: _____ To: _____

State job titles and describe job duties: _____ Starting salary: _____

_____ Last salary: _____

_____ Reason for leaving: _____

May we contact your present employer as a reference prior to making a hiring decision? Yes No

Employer's name (current name): _____ Telephone no.: _____

Has this employer performed business under another name in the past? Yes No

If yes, what are the names known to you? _____

Address: _____

City: _____ County: _____ Post code: _____

Name of supervisor: _____ Dates employed: From: _____ To: _____

State job titles and describe job duties: _____ Starting salary: _____

_____ Last salary: _____

_____ Reason for leaving: _____

Employer's name (current name): _____ Telephone no.: _____

Has this employer performed business under another name in the past? Yes No

If yes, what are the names known to you? _____

Address: _____

City: _____ County: _____ Post code: _____

Name of supervisor: _____ Dates employed: From: _____ To: _____

State job titles and describe job duties: _____ Starting salary: _____

_____ Last salary: _____

_____ Reason for leaving: _____

Professional business references (other than supervisors listed in the Employment History section on page 2)

Name, address and position	Employer	Telephone

Have you ever had any serious illness or injury? Yes No

If yes, please provide details: _____

Are you registered as disabled? Yes No

Have you any health problems or physical disabilities? Yes No

Do you require any adjustments or special arrangements to be made when attending for interview? Yes No

If yes, please provide details: _____

Are you interested in working: Part time Full time

Are there any days, shifts, hours you will not work? Yes No

If yes, please provide details: _____

Can you meet the attendance requirements of the position? Yes No

If selected when will you be able to start work? _____

Have you signed an agreement relating to non-compete, trade secrets, or confidential information with any other employer?

Yes No

If yes, please attach a copy of the agreement to this application.

Would that agreement prevent you from performing the position for which you are applying? Yes No

If yes, please provide details: _____

Would that agreement restrict you from working for the company? Yes No

If yes, how? _____

Do you have a criminal record? Yes No

This does not apply to convictions which are spent under the Rehabilitation of Offenders Act 1974.

(Note that a 'Yes' answer does not automatically disqualify you from employment, since the nature of the offence, date and the job for which you are applying are also considered.)

If yes, please describe the conviction(s) fully, listing the dates and nature of the offence(s): _____

DRIVING RECORD: (Only if licence is required for the position for which you are applying)

Do you hold a valid British driver's licence? Yes No

Licence no. _____

Is it subject to any endorsements? Yes No

If yes, please provide details: _____

COMMENTS

Please add any comments you wish to make to support your application

INTERESTS

Please describe your leisure interests

Please Sign here to verify that the information you have given is honest and correct:

PRINT NAME _____

SIGN _____ DATE _____

EQUAL OPPORTUNITIES MONITORING FORM

Target is committed to a policy of equal opportunities in employment. In order to monitor the operation of this policy, it is necessary to collect information from all job applicants and employees on the key characteristics which relate to equal opportunity in employment.

The information collected will form a confidential record which will only be used to monitor the operation of the employers Equal Opportunities Policy. This information is requested on a separate form and it will not be seen or made known to selector.

Please mark the following boxes with a tick and delete any words as appropriate.

1. Gender: Female Male
2. Date of birth: _____
3. Marital status: Married/live with partner Single/divorced/widowed
4. No. of dependants: Dependent children Other dependants
5. Ethnic Origin:
Please read the list below and tick the appropriate box that you feel most nearly describes your ethnic origin:

ASIAN		BLACK	
<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Chinese	<input type="checkbox"/> African	<input type="checkbox"/> Caribbean
<input type="checkbox"/> Indian	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Other – please describe _____	
<input type="checkbox"/> Other Asian – please describe _____			

OTHER

 White
 Any other ethnic group – please describe _____
6. Are you registered disabled? Yes No

Thank you your co-operation in providing this information. Please return this form to Charlotte Pedrette, HR Assistant:

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