



Confidential Application for Employment

Full Name: Address: Post Code: Home telephone No. Mobile telephone No. Email address: National Insurance Number:	Name & Address of Next of Kin Post Code Telephone Number Relationship
Date of Birth	
Position Applied for	How did you learn about the vacancy

Do you hold a full, clean current UK Driving Licence? **YES / NO** Is this for manual or auto ? **MAN / AUTO** (delete as applicable)
 List any driving offences and points (with dates) on your licence:

General

Do you require a work permit to work in the UK? **YES / NO** (delete as appropriate).
 If an offer of employment is made, you will be required to provide documentary evidence of your right to work in the UK before you start work. A copy of the relevant documents will be retained by the Company.

Employment History

Dates Employed (most recent first)	Name & Address of Employer	Job Title and Description of Duties	Rate of Pay	Reason for Leaving

Experience and Skills

Please list any relevant skills or experience you have that may be applicable to this position.

Health Details

Are you in good general health? If No please state medical condition.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Are you receiving any medical treatment? If yes, please state what?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you have any form of disability? If Yes please list:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Please list any absence from work in the past 12 months and state the reasons for them.				

Criminal Record

This post is/is not* exempt from the provision of the Rehabilitation of Offenders Act 1974. Please list any criminal convictions/cautions (including spent convictions if exempt post)

*Office to delete as appropriate before form is completed by applicant

References

Please give the names and addresses of two people to whom we can apply for a reference. One of these should be your current or most recent employer. If you do not want us to contact them unless we offer you the position please tick the box.

Name Position Company Telephone No. Address	Name Position Company Telephone No. Address
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Declaration

- I confirm that the information provided on this application form is accurate and correct. I understand that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
- I hereby give my authority for the organisation to contact my doctor for any further information regarding my state of health.
- In the event that I am offered a job I understand that I have an obligation to notify the Department of Work and Pensions and / or Council Housing Benefit of my earnings (if applicable).

Print Name:

Signed: Date:

Please send this form to: Opusclean Head Office, The Dairy, Narborough Wood Park, Desford Road, Enderby, Leicester, LE19 4XT
Tel: 0845 269 1800 www.opusclean.co.uk