



www.powrmatic.co.uk

CONFIDENTIAL - Application for Employment (download form)

Please complete all relevant parts in your own handwriting in BLACK/BLUE INK. Please advise us of any special arrangements that may be needed to facilitate an interview. All applicants will be required to prove legal ability to work in the UK.

PERSONAL DETAILS	
Title:	Telephone Number(s):
Surname:	Home:
Forenames:	Mobile:
Address:	Email:
	National Insurance No:
Do you require a work permit to work in the UK? YES / NO	
Please note: Successful candidates will be required to submit documentary proof of entitlement to work in the UK (i.e. birth certificate or passport showing EEA citizenship or entitlement to work in the UK, National Insurance card, P45 or P60 showing name or NI number or letter from the Home Office showing right to work in the UK.	

POSITION REQUIRED
Position applied for:
How did you hear of this vacancy?:
What salary do you expect?

DRIVING LICENCE
Do you hold a current, full driving licence? YES / NO
Do you have any endorsements? YES / NO *If yes, please expand

PREVIOUS SERVICE WITH POWRMATIC
Have you worked for us before? YES / NO
If yes, when? Position held?

RELATIVES EMPLOYED BY POWRMATIC
Name: Relationship:

FURTHER TRAINING

Please give details of any further training undertaken (i.e. post graduate, research, technical courses, evening classes etc): If successful, proof of apprenticeship or professional qualifications will be required.

MEMBERSHIP OF PROFESSIONAL BODIES

Please list the names of any professional bodies that you are a member of:

OTHER INTERESTS

Please indicate any other interests or activities in which you take part:

Are you member of the territorial or any other Volunteer reserve? YES / NO *If yes, please detail

Have you ever held any position of Public Office i.e. Local Government Councilor, Governorships or other positions of voluntary organizations? YES / NO *If yes, please detail

CRIMINAL CONVICTIONS (Rehabilitation of the Offenders Act 1974)

Do you have any 'unspent' criminal convictions? YES / NO *If yes, please detail

SUPPORTING INFORMATION

Please use this section in support of your application to provide evidence to show how you meet the requirements of the role. This can include professional activity, examples of achievements, evidence of updating knowledge and skills (please continue on a separate sheet if necessary).

REFERENCES

Please give names and addresses of two referees whom we can approach; one of whom must be your current or most recent employer (references will only be taken up once an offer of employment has been made).

Referee 1.

Name:

Job Title:

Address:

Telephone:

Relationship:

Referee 2.

Name:

Job Title:

Address:

Telephone:

Relationship:

HEALTH

Once an offer of employment has been made, you will be required to complete a confidential health assessment questionnaire, which is submitted direct to our Occupational Health advisor.

Please give details of the number of days and occasions you have been absent from work during the last 12 months as a result of ill health:

AUTHORISATION/DECLARATION/DATA PROTECTION

I authorise the Company to approach my former employers, educational establishments, Government agencies and personal referees for verification of information given herein.

I declare that the information given in this document is correct to the best of my knowledge and belief. I understand that if found subsequently to be untrue, the Company shall be entitled to terminate any employment that may have been offered to me.

I consent to the information I provide being kept on file and processed for recruitment/employment purposes in accordance with the principles of the Data Protection Act 1998.

Health & Safety (young persons) regulations 1997: In line with the afore mentioned Act you must advise anyone with parental responsibility, of your application to work in a factory environment.

Signed:

Date:

PLEASE BE AWARE THAT POWRMATIC OPERATES A NO SMOKING POLICY

Please return to:

Powrmatic
Hort Bridge
Ilminster
Somerset
TA19 9PS



Equal Opportunities Monitoring Form

The company is committed to ensuring that all job applicants and staff have an equal opportunity for employment and advancement in accordance with current legislation, regardless of gender, marital status, ethnic origin, age, disability, religion or belief or sexual orientation. In order to help us assess the effectiveness of this policy and, if appropriate, identify areas where improvements are necessary, it is important that you complete the sections below.

VACANCY DETAILS	
Position applied for:	

PERSONAL DETAILS			
Surname:		First name(s):	
Title:		Gender (please circle): Male / Female	
Age (please circle):		Marital Status (please circle):	
16 – 19	20 – 29	30 – 39	Single Married Separated
40 – 49	50 – 59	60 - 75	Divorced Living with partner

ETHNIC ORIGIN (please tick)			
White British		Caribbean	
Black - Other		African	
Indian		Pakistani	
Bangladeshi		Chinese	
Asian other		Other (please specify)	

RELIGION (please tick)			
Christian		Muslim	
Buddhist		Sikh	
Hindu		Atheist	
Jewish		Other (please specify)	

DISABILITIES	
Do you consider yourself to have a disability?	YES / NO
Are there any adjustments which you consider need to be made for the purpose of :	
<ul style="list-style-type: none"> a) The interview b) The job, if offered? 	

Thank you for completing this questionnaire.

Information given will be kept confidential within the Human Resources Department. It will not be used in the selection process, nor disclosed outside the department. It will be placed on a Human Resources database, used in compiling equal opportunity statistics and kept in the strictest confidence.