

## APPLICATION FOR EMPLOYMENT



	POS	T DETAILS			
Post Title:					
Department:					
Closing Date:					
	PERSO	NAL DETAILS			
Surname:		First Name(s):			
Marital Status:		National Insurance Number:			
Address (including postcode):		·			
Mobile:		Email Address:			
Driving Licence: YES/NO		Own Transport: YES / NO	Own Transport: YES / NO		
Applying for this Vacancy					
-	_		Employment) Order 2004, Oregon		
Timber Frame Limited has a leg	al obligation to ensure that any	successful applicant is legally er	ntitled to work in the U.K.		
Are you a British subject or a na	ational of any EU country?		YES / NO		
If answered no, do you have the			YES / NO		
Do you have a current work per	<del>-</del>		YES / NO		
If, answered yes, please state th	ne expiry date of your right to v	vork in the UK and/or work perm	it:		
	QUALIFICATION	S AND CERTIFICATION			
Please specify details of any qu	alification or training courses w	hich have led to certification			
Subject / Course		Qualification / Grade	Date		
Professional Membership		Grade / Awarding Body	Date		
Froressional Membership		Grade / Awarding Body	Date		
	EMPLOY	MENT HISTORY			
Name & Address of Current Em					
	. ,				
Post Held:		Date of Commencement:			
Present Salary:		Expected Salary:			
Please summarise your main du	uties and responsibilities in the				
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EMPLOYMENT HISTORY					
Previous Employment (Commen	cing with the most recent):				
Name & Address of Employer	Dates	Post Held	Reason for Leaving		
. ,					
	REFER	ENCES			
Please give the names of your re	eferees				
-	rk capacity and one must be your c				
	ontact with any referees prior to yo				
Name & Address of Referee No.	1	Name & Address of Referee No.	2		
Post Title:		Post Title:			
Phone Number:		Phone Number:			
Priorie Number.	HEA				
Please give details of any sickne		LIN			
	1	No.Of Days:			
From:	To:	NO.OI Days.			
Do you have any disabilities or h	l nealth problems that may affect yo	l nur work?	YES / NO		
· ·			•		
	on, light lifting may be required, a	re you aware of any medical	YES / NO		
condition that may impact on th	, ·				
Please note, this information wi	ll not count against you, but will h	elp us consider ways in which we	e can reasonably accommodate		
your needs.					
	CONVIC	CTIONS			
Do you have any unspend convi	ctions or pending criminal proceed	dings against you?	YES / NO		
If yes, please give details below.					
Conviction Date:	Offence:		Fine/Sentence:		
			-		
	DECLAF	RATION			
I verify that all the information I have given on this application form to be correct and have completed all relevant sections.					
<b>,</b>	3 11	•			
I also understand that the information given on this form is strictly confidential and will only be used for the purpose of applying					
for this position and will only be viewed by authorised personnel within Oregon Timber Frame Limited.					
This application will be retained	for a maximum period of 6 month	ns and will be securely destroyed	thereafter.		
Signature:		Date:			
		Date.			
Where did you see the post adv	ertised:				
COMPLETED APPL	ICATION FORMS SHOULD BE MAI	RKED "Private & Confidential" A	ND BETHENED TO:		

Human Resources Department, Oregon Timber Frame Limited, Dunsdalehaugh, Selkirk, TD7 5EF