

DJS Application Form

For Office Use Only
 Regret before Interview
 Regret after Interview
 Offer Form Attached

IMPORTANT:
 Please attach
 passport sized
 photo

SQUIRE'S GARDEN CENTRES
 Job application Form

Please complete all sections of this form **which apply to you**.
 All information will be treated as confidential. The form should
 be completed in the applicant's own handwriting.



Please complete and return to (Centre Address):

Do you have any disabilities which may affect your application YES / NO
 If yes what reasonable adjustments do you feel could be made to the recruitment process that will assist you in your application _____

Vacancy Title:	Centre:
Please state where you heard about this vacancy:	

Personal Details (please circle as applicable)

Surname:	First Name:
Title: Mr / Miss / Mrs / Ms Sex: M / F	Middle Name(s): (known as)
Home Address:	Home Telephone:
	Work Telephone:
	Mobile:
Post Code:	E-mail Address:
Place of Birth:	Nationality:
National Insurance Number:	
Marital Status: Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/>	
Academic School Year. Are you in your last academic school year having taken your GCSE's YES / NO	

Are you willing to work Sundays and Bank Holidays YES / NO
 Please state below the days and time when you will be available to work:

	MON	TUE	WED	THU	FRI	SAT	SUN
Earliest time available							
Latest time available							

Work Permit Details - do you require a work permit? YES / NO If yes, please give details:

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Have you ever worked for the Company before? YES / NO	Dates of Employment: From: To:	Centre:
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Next of Kin Details – Please give the name and address of someone whom the Company should contact in the event of an emergency.

Full Name:	Relationship:
Address:	Home Telephone: Work Telephone: Mobile:

Education Details Please give details of all schools / colleges / universities attended, along with dates and examinations / qualifications obtained:

Name of school, college, university:	Qualifications Obtained:

Do you belong to any professional bodies? If so, please give details of membership:

Please give details of any professional qualifications held, together with dates:

Hobbies and Interests: Please give details of any hobbies or interests:

What do you consider to have been your main achievements within your current / most recent role? Please explain why you feel that these are particularly important.

What has attracted you to this position? In what way do you believe that your skills and experience will be of benefit to the role?

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Employment History:

Please complete details of your employment history since leaving full-time education.

Current / Most Recent Employer / School / College		
<u>Name of Employer / (School / College)</u>	From	To
Address:		
Telephone Number:		
Job Title and Responsibilities (if applicable):	Reason for Leaving:	
	Salary on Leaving (if applicable):	
If current employer, can we contact YES / NO		

Previous Employment		
<u>Name of Employer / (School / College)</u>	From	To
Address:		
Telephone Number:		
Job Title and Responsibilities (if applicable):	Reason for Leaving:	

Previous Employment		
<u>Name of Employer / (School / College)</u>	From	To
Address:		
Telephone Number:		
Job Title and Responsibilities (if applicable):	Reason for Leaving:	

If you require more space, please continue on a separate piece of paper.

Please attach an up-to-date CV if you have one.

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Do you have any criminal convictions other than those defined as “spent” under the Rehabilitation of Offenders Act 1974?
YES / NO If yes, please give details:

Do you know anyone employed by D.J. Squire & Co. Ltd? If yes, please state their name, relationship and the location where they work.

How soon could you start work if appointed?

If we offer you a position we may ask you to apply for a police/criminal records check at the start of, or during your employment with us. Please confirm that you are prepared to make such an application at the Company’s expense.
YES / NO

Do you have a Driving Licence? YES / NO
Do you have any endorsements on this licence? YES / NO If yes, please give details:
Are you currently banned from driving? YES / NO If yes, please give dates:
Do you have your own transport? YES / NO

Applicant Declaration:

Thank you for completing this form. Everything that you have told us will be treated as confidential. We shall be using the information in order to select candidates for interview.

I declare that the above information is, to the best of my knowledge, accurate. I will notify D.J. Squire & Co. of any changes.

Signed: _____ Date: _____

Please ensure you fill in a medical questionnaire with this application form

Sex and ethnic origin

This organisation strives to operate a policy of equal opportunity and not discriminate against any person because of sex, race, colour or national origin. To help us monitor this, will you please provide details as below. This information will only be used for this purpose. What is your ethnic group? Choose ONE section from A to E, then tick the appropriate box to indicate your cultural background.

A White

British

Irish

Any other White background (please specify).....

B Mixed

White and Black Caribbean

White and Black African

White and Asian

Any other Mixed background (please specify).....

C Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background (please specify)

D Black or Black British

Caribbean

African

Any other Black background (please specify).....

E Chinese or other ethnic group

Chinese

Any other (please specify)

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If you are called for an interview please bring the following documents with you. Failure to provide any of the following will unfortunately mean employment will not be able to commence.

- YOU MUST PROVIDE THE ORIGINALS OF THE DOCUMENTS AS LISTED BELOW

Asylum and Immigration Act 1996 - Prevention of Illegal Working

Your employment is conditional upon the receipt of original documentary proof of your eligibility to work in the UK. These documents will be photocopied and retained in your personal records.

List 1

- A passport showing the holder is a British Citizen or has right of abode in the UK
- A document showing the holder is a national of a European Economic Area (EEA) country or Switzerland. This must be a national passport or national identity card
- A residence permit issued by the Home Office to a national from a European Economic Area or country or Switzerland
- A passport or other document issued by the Home Office which has an endorsement stating that the holder has a current right of residence in the United Kingdom as the family member of a national from a European Economic Area country or Switzerland who is resident in the United Kingdom
- A passport or other travel document endorsed to show that the holder can stay in the United Kingdom, or has no time limit on their stay
- A passport or other travel document endorsed to show that the holder can stay in the United Kingdom; and that this endorsement allows the holder to do the type of work offered, if they do not have a work permit
- An application Registration Card issued by the Home Office to an asylum seeker stating that the holder is permitted to take employment

List 2

If a document from list 1 is not available you must provide two documents from this list in one of two prescribed combinations shown below

First Combination

- A document giving the person's permanent National Insurance Number and name. This could be a: P45, P60, National Insurance Card or a letter from a Government agency.

And

- A full Birth Certificate issued in the United Kingdom, which includes the names of the holder's parents; OR
- A birth certificate issued in the Channel Islands, the Isle of Man or Ireland; OR
- A certificate of registration or naturalisation stating that the holder is a British citizen; OR
- A letter issued by the Home Office to the holder which indicates that the person named in it can stay indefinitely in the United Kingdom, or has no time on their stay; OR
- An Immigration Status Document issued by the Home Office to the holder with an endorsement indicating that the person named in it can stay indefinitely in the United Kingdom, or has no time limit on their stay; OR
- A letter issued by the Home Office to the holder which indicated that the person named in it can stay in the United Kingdom, **and** this allows them to do the type of work offered; OR
- An Immigration Status Document issued by the Home Office to the holder with an endorsement indicating that the person named in it can stay in the United Kingdom, **and** this allows them to do the type of work offered

Or Second combination

- A work permit or other approval to take employment that has been issued by Work Permits UK

And

- A passport or other travel document endorsed to show that the holder is able to stay in the United Kingdom and can take the work permit employment in question; OR
- A letter issued by the Home Office to the holder confirming that the person named in it is able to stay in the United Kingdom and can take the work permit employment in question

RECRUITMENT HEALTH QUESTIONNAIRE

Name _____ D.O.B. _____

It is our responsibility to make sure that the work you are being considered for will not be detrimental to your health. Please help us to do this by filling in this form. Do not include confidential information as the recruiting staff will read this form and check your understanding of the questions. If you answer YES to any box you will be given a further Questionnaire that will only be read by our Occupational Health Team and any comments you make will be confidential.

We believe most people will be fit for employment. If you believe you have a health problem that would cause you some difficulty in carrying out duties please tick YES. Otherwise answer NO.

Duties	Examples	Yes	No
Walking			
Standing in one place for more than one hour	Preparing food. Working outside.		
Sitting in one place for more than one hour	Using a till.		
Using fingers and hands	Operating a till. Using a pricing gun.		
Reaching/Twisting/Turning	On a till.		
Bending/kneeling	Removing items from floor.		
Lifting/Carrying/Pushing/Pulling	Equipment.		
Walking up/down stairs/ladders			
Working for a short time in cold or freezing areas to collect chilled or frozen food.			
Working in hot areas	Kitchens.		
Concentrating and remembering tasks	Instructions. Tasks.		
Dealing with customers in a pressurized environment calmly and courteously			
Do you have any condition or illness, current or past, that may affect your work or that you think Health Services should know about?			
Disability Discrimination Act			
Is there any current or recurring medical problem or disability that your employer needs to be aware of in order to make adjustments to your place of work to enable you to do the job?			
Please give details of any absence from work over the past 2 years. (excluding holidays)	Please tick the statement that applies to you and give details where necessary. I have not had any absence in the past 2 years <input style="float: right;" type="checkbox"/> I have had absence in the past 2 years Details given below: <input style="float: right;" type="checkbox"/>		

Signed: _____ Date _____

For Office use only:

Please tick result

- | | |
|---------------------------------|--------------------------|
| Fit to engage | <input type="checkbox"/> |
| Give Confidential Questionnaire | <input type="checkbox"/> |
| Await feedback from OHA/OHP | <input type="checkbox"/> |

THIS FORM TO BE RETAINED IN RECRUITMENT NOTES