

Application Form

Your application will not be considered if you do not answer all questions. If a question does not apply to your application write NOT APPLICABLE. Please use additional sheets of paper where necessary.

The details and information you give will be treated as private and strictly confidential.

Send completed applications to **LittleInch Limited, Old Greenock Road, Inchinnan, PA4 9PH**

For your application to be considered we require documentation to verify your identity and confirm that you are legally entitled to work in the UK. Documents must be in **original form** and you must **bring them with you at time of your interview**. Please indicate in the tick boxes which documents you will bring with you.

Compulsory documents

Passport

Full birth certificate

Supporting documents

Written confirmation from a notary public

Utility bill with your own name and address

National insurance number

UK Home office work permit

UK Driving licence

If you are granted an interview we would like to take a photograph to facilitate a swipe card being issued.

I agree to my photograph being taken *

I disagree to my photograph being taken

** If you are unsuccessful this photograph will be destroyed.*

Position Applied for: _____

Have you applied to LittleInch Limited before: _____ If so when: _____

About You

Surname: _____

Initial(s): _____

Title: Mr / Miss /
Mrs / Ms

Previous Name: _____

Address:

Postcode:

Telephone Numbers (including STD code):

Home: _____ Mobile: _____ Other: _____

Please state the name, address and telephone number (both at home and at work) of your next of kin or a close friend who may be contacted in case of emergency:-

Your Education (Please enclose further sheets if required.)

Secondary Education

Date From	Date To	Examinations taken and results

Further Education / Training

Date From	Date To	Full name and address of College / University	Examinations or courses taken and results

Current or Most Recent Employment (Please also include work experience.)

Date From	Date To	Full name and address of Employer	Job Title and Final Position	Final Wage Rate

Briefly outline the nature of your job, your responsibilities and reporting structure.

(Please enclose further sheets if required.)

Please indicate why you left (or wish to leave) this position.

If applicable, how much notice are you required to give?

Previous Employment

Date From	Date To	Full Name and Address of Employer	Job Title

If there are any gaps in your employment history over the last five years, please indicate the dates and reasons here:

Employment References (Please note personal references are not accepted)

Please note that **two** employment references will be sought from your current or most recent employer(s) taken from the details given below prior to any conditional offer of employment being made. The Company retains the right to withdraw the offer of employment should we receive unsatisfactory references.

If there is no previous or relevant employment experience, you are required to complete the section "Personal References" in this application form.

	Reference 1	Reference 2
Full Name:	_____	_____
Position:	_____	_____
Company and address:	_____	_____
	_____	_____
Telephone Number:	_____	_____

For Qualified Nurse Only

Date on Register/Roll: _____ P.I.N.: _____

Additional Registrations: _____

Character/Personal References

Where there are no relevant employment referees, if for example this is your first job, you must provide two Personal/character referees. These **should not be relatives**, but could be a school / college tutor or other professional person e.g. doctor or lawyer. Any offer of employment is conditional on receipt of satisfactory references.

Full Name:

Address:

Profession:

For how long have you known this person and in what capacity?

Full Name:

Address:

Profession:

For how long have you known this person and in what capacity?

Additional Information

You **must** answer this question.

Have you ever been convicted of any offence? YES / NO

Please note that because of the nature of the work for which you are applying, this post is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (exemptions) Order 1975. You are therefore not entitled to withhold any information about convictions you may have which would affect your suitability as an employee.

Please give details below:

Company Interest

Source of application (e.g. speculative, newspaper advertisement or job centre.)

Please give the dates of any holidays or appointments booked in the next 6 months.

Have you been issued with any disciplinary warnings, which have not been overturned within the last 12 months?

YES / NO

If yes, please state level and reason:

