

# AAW Control Systems Limited

**Application for employment**

**Position applied for**

This form has been designed to tell us all we need to know about you at this stage. Please complete the form in block capitals. Should you not have enough space to complete your answer please attach additional sheets.

Surname		Title (Mr etc)	
Forenames:		Home Tel:	
Previous names (if any)			
Address:		Work/Mobile:	
		Date of Birth:	
		Marital Status:	
		Number of Children	
		Nationality:	
		Religion	
Smoker:		Male/Female	
Any Medical Conditions			
If you are disabled or suffer from an acute or chronic ill-health problem, please give details of any special arrangements required.			
Please give details of any criminal convictions that you have, excluding any that may be spent under the Rehabilitation of Offenders Act 1974.			
Are you subject to immigration control	<b>YES/NO</b>		
Are you free to take up employment in the UK	<b>YES/NO</b>		
Dates you are <b>NOT</b> available for interview			
Do you own your own a road worthy vehicle			

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## Education/Qualifications

From GCSE or equivalent to degree level in chronological order

Dates	Qualifications

## Postgraduate education or study or any other professional qualifications

Dates	Qualifications

## Present/Previous employment

Please give details of your last three jobs. Any relevant posts held before then may also be mentioned.

Please begin with your present or most recent position and then work chronologically backwards.

Company,	Dates	Job Title, Description	Salary

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Company,	Dates	Job Title, Description	Salary

**Do you have any other or skills (e.g. knowledge of a foreign language, first Aid, etc.)?**


**Strengths**


**Weaknesses**


**Other interests and Hobbies**


**Please give details of any time not accounted for elsewhere in this application form**


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**Please give details of the type of UK driving License held, any claims, convictions or disqualifications**

	Details
Type of UK Driving License	
Date UK License obtained	
Number of years resident in the UK	
Have you ever been disqualified from driving	
Have you in the last 11 years been convicted of any offence connected with a motor vehicle Or is any prosecution pending	
Have you made any claims or had an accident or loss during the last 5 Years (either fault)	
Give details of any Loss of limb, eye, Vision or hearing and any heart Disorder, diabetes, epilepsy, fits of Any kind, mental condition or any physical disability.	
Has any motor insurance ever been cancelled, declined or refused or has an increased premium been charged or any special terms imposed.	

**Please use this space to say why you are interested in the post for which you have applied and mention anything else which supports your application.**


**If you are successful, when could you take up your post**

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**Do you have any holidays currently booked**


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**Referees** Please give details of two referees. Neither should be a relative or contemporary one should be a past manager.

<b>First referee</b>	<b>Second referee</b>

**Declaration**

I declare that the information I have given on this form is, to the best of my knowledge and belief, true and complete. I understand that if it is subsequently discovered that any statement is false or misleading, or that I have withheld relevant information, my application may be disqualified or, if I have already been appointed, I may be dismissed.

Signed: .....

Date: .....

Any information on this sheet will not be divulged to anyone outside this company except for insurance purposes.