

Factory Lane West, Halstead Essex, CO9 1EX

Tel: 01787 477021 - Fax: 01787 474264 enquiries@maycast.co.uk www.maycast.co.uk

Application Form

Application for em	ployment as:			
Surname: (Block l	etters)			
Other names:	••••••	• • • • • • • • • • • • • • • • • • • •	••••••	••••••
Address:	••••••			•••••
••••••	••••••			•••••••
••••••	••••••	••••••	•••••••	•••••••
Telephone:	••••••	• • • • • • • • • • • • • • • • • • • •	••••••	•••••
Email Address:				

EDUCATION AN	JD TRAINING
	s of any examinations taken:
	(e.g. technical college, evening classes):
Any craft or other	training:
EMPLOYMENT I	
Address:	
Date employed:	fromto
Reason for leaving	7 *

No approach will be made to your present employer before an offer of employment is made to you

Past employer (1).	
Telephone No:	
Job title:	
Duties:	
Rate of pay:	
Date employed:	from
	to
Reason for leaving	······································
D1 (2)	
rast employer (2).	
Telephone No:	
Job title:	
Duties:	
Rate of pay:	
Date employed	from:
2 2	to
Reason for leaving	

The above past employers will be contacted for reference purposes

Please tell us why you applied and give examples of things you have that make you particularly suited to the job.			
Have you ever been convicted of a criminal offence? (declaration subject to the Rehabilitation of Offenders Act 1974))		
If you have a disability please tell us about any adjustments we may need to make to assist you at interview			
Please tell us if there are any dates when you will not be available for interview			
I can confirm that to the best of my knowledge the above information is correct. I accept that providing deliberately false information could result in my dismissal.	<u>l</u>		
Signature Date			

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