



BOWLING, KARAOKE, ARCADE & SNOOKER / POOL
TABLES

JOB APPLICATION FORM, please complete even if you attach c.v,

Position applied for: _____

Name: - _____

First

Second

Last

Address: _____

post code _____

Telephone: _____

Mobile: _____

National Insurance Number: _____ DOB _____

Due to new legislation we require your Passport number _____

Date available:

Hours available: part time/ full time?

We are a 7 day week business and your hours will include weekends and bank holidays on a rota basis.

Do you hold a full driving license: YES/NO

Method of transport to work:

Next of kin:

Relationship:

Tel no:

Address,

Post code

SCHOOL/COLLEGE UNIVERSITY	DATES	SUBJECTS	GRADE

REASON FOR APPLYING FOR THE ABOVE POSITION

PREVIOUS EMPLOYMENT	(MOST CURRENT FIRST)
EMPLOYER:	JOB TITLE:
	DUTIES:
PHONE NUMBER:	
	REASON FOR LEAVING:
EMPLOYED FROM:	
	SALARY

PREVIOUS EMPLOYMENT	(MOST CURRENT FIRST)
EMPLOYER:	JOB TITLE:
	DUTIES:
PHONE NUMBER:	
	REASON FOR LEAVING:
EMPLOYED FROM:	
	SALARY

PREVIOUS EMPLOYMENT	(MOST CURRENT FIRST)
EMPLOYER:	JOB TITLE:
	DUTIES:
PHONE NUMBER:	
	REASON FOR LEAVING:
EMPLOYED FROM:	
	SALARY

IF YOU HAVE ANY GAPS IN YOUR EMPLOYMENT HISTORY PLEASE GIVE BRIEF EXPLANATION

ANY OTHER SKILLS WHICH MAY BE RELEVANT TO WORK

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HOBBIES AND INTERESTS

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MEDICAL HISTORY (PLEASE GIVE DETAILS OF ANY SERIOUS ILLNESS, OPERATIONS, ACCIDENTS OR DISABILITIES)

**HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE: YES/NO
IF YES PLEASE GIVE DETAILS (UNDER THE REHABILITATION ACT 1974, SPENT
CONVICTIONS NEED NOT BE DECLARED)**

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REFERENCES (PRESENT AND PREVIOUS)

NAME:	NAME:
ADDRESS:	ADDRESS:
TELE NO:	TELE NO:
OCCUPATION:	OCCUPATION

The information provided on this application is accurate to the best of my knowledge and subject to verification By this company. I must truthfully answer all the questions on this application. I also understand that if I do not, I may be refused employment or terminated if discrepancies come to light after employed.

Signature: _____

Date: _____

Office use start date? _____ @ _____