



Stanton House Hotel

The Avenue, Stanton Fitzwarren, Swindon, SN6 7SD

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Email: reception@stantonhouse.co.uk

Website: www.stantonhouse.co.uk

APPLICATION FOR EMPLOYMENT

Please complete this form in your own handwriting, sign it as a correct record of the facts you have stated and return it to the above address.

ALL APPLICATIONS ARE TREATED IN THE STRICTEST OF CONFIDENCE

Personal details:

Surname _____ Forenames _____

N.I. Number _____

Permanent address _____

Home telephone number _____

Mobile telephone number _____

Daytime telephone number _____

Email address _____

Employment details:

Are you eligible to work in the UK? _____ Yes _____ No _____

Position sought? _____

Dates not available for interview? _____

Notice required by employer? _____

How did you learn about this job opportunity? _____

What factors influenced your decision to apply? _____

Salary expected? £ _____

Skills:

Special skills: list machinery you can operate or any other work oriented skills.

I certify that the answers given by me to the foregoing questions and statements are true and accurate, and agree that the company shall not be liable if employment is terminated because of falsity of statements, answers or omissions made by me in this application for employment.

As a condition of employment, I agree to undergo a medical examination, should it be necessary. If I am employed, or if this application is accepted prior to a medical examination, I understand that my employment or an offer of employment is not binding until I have satisfactorily passed the medical examination.

Signed _____
Date _____

FOR OFFICE USE ONLY

Interview date _____
Start date _____
Position sought _____
Hours per week _____
Interviewed by _____
Starting salary _____

Interviewer sign / date _____

Management authorisation sign / date _____

ADMINISTRATION USE ONLY

Copy of passport _____
Copy of driving license _____
Work permit _____
P45/P46 _____
New employee form _____
References _____
Clock-in card number _____
Induction date _____
Contract signed _____

Administration Input _____
Employee number _____