

Elliott Baxter & Company Limited  
[www.ebbpaper.co.uk](http://www.ebbpaper.co.uk)

## JOB APPLICATION FORM



PLEASE ENSURE THAT YOU COMPLETE ALL SECTIONS OF THIS APPLICATION FORM  
TO THE BEST OF YOUR ABILITY.

IF YOU HAVE A DISABILITY WHICH MEANS THAT YOU ARE UNABLE TO COMPLETE THIS  
FORM, PLEASE LET US KNOW SO THAT ALTERNATIVE ARRANGEMENTS CAN BE MADE.

**Please complete this accurately, giving as many details as possible of your skills and experience relating to this job application. You will be advised of the outcome of your application in writing.**

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**POSITION APPLIED FOR:**

Job Title :  
Location :

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**APPLICANT'S DETAILS**

Title : Surname : Forename(s) :

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Current permanent address :

Postcode :

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Are you currently employed? Yes / No *(delete as appropriate)*

How much notice do you need to give your current employer? .....

Are there any restrictions regarding your employment? Yes / No *(delete as appropriate)*  
If you answer 'yes' please supply details on a separate sheet of paper.

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**CONTACT TELEPHONE DETAILS**

Home :  
Mobile :  
Email address :

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Marital Status : single / married / divorced / co-habiting / other

National Insurance No. :

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**DO YOU HOLD ANY OF THE FOLLOWING:**

- Provisional Driving Licence
  - Full UK Driving Licence
  - Class 1 LGV
  - Class 2 LGV
  - Fork Lift - Reach
  - Counterbalance
  - Digital Tacho card
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Do you have any driving convictions which resulted in points on your licence? Yes / No *(delete as appropriate)*  
If yes please give full details :

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Do you have any criminal convictions? Yes / No *(delete as appropriate)*  
If yes please give details on a separate sheet.  
This should exclude any spent convictions under Section 4 (2) of the rehabilitation of Offenders Act 1974.

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**EMPLOYMENT RECORD**

Please start with your most recent employment. Briefly describe the main duties & responsibilities of your position:

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Current / most recent employer

Name :  
Address :  
Job Title :  
Brief description of duties : From: To:

Reason for leaving :

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Name :  
Address :  
Job Title :  
Brief description of duties : From: To:

Reason for leaving :

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Name :  
Address :  
Job Title :  
Brief description of duties : From: To:

Reason for leaving :

---

Name :  
Address :  
Job Title :  
Brief description of duties : From: To:

Reason for leaving :

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Please give reasons for any breaks in employment :

## EDUCATION

Please tell us about your education and any qualifications gained.  
Include any training courses which you feel are relevant to your application.

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Name & Date attended  
University / School / College

Subject studied

Qualification level

Date gained

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## TRAINING

Please list any training you have received or courses which did not lead to a qualification but which you feel are relevant.

Training course :

Date :

## **EXPERIENCE / SKILLS**

This section is for you to add any details or specific information in support of your application. After reading the job description carefully, consider to what extent you have gained the skills and experience necessary for the post.

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Please let us know here, about your leisure interests, hobbies and sporting activities :

**HEALTH**

Absence

How many days absent and how many occasions have there been in the last year?

..... days, ..... occasions

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**MEDICAL**

Do you have, or have you ever had, any of the following : Yes / No

If Yes please explain and give details where possible :

Any form of heart disease / chest pains :

High blood pressure or circulatory :  
problems (list medication)

Fits, blackouts, epilepsy or dizziness :

Diabetes Mellitus (state treatment) :

Chest complaints i.e. asthma, :  
bronchitis, or use of inhalers

Mental illness, depression, anxiety :  
or panic attacks, or receiving  
counselling

Are you currently taking any form of :  
medication or undergoing treatment

Are you on any waiting list for hospital :  
treatment

Is there anything concerning your :  
Medical history or state of health that  
is relevant to your application

How would you describe your general health? Excellent ..... Good ..... Average ..... Poor .....

**REFERENCES**

Please give name, address and position / occupation of two referees. One must be your present or most recent employer. References will only be taken up for the successful candidate. Testimonials or references from friends and relatives are not acceptable.



1. Name :  
Position :  
Organisation :  
Address :  
Tel No. :

2. Name :  
Position :  
Organisation :  
Address :  
Tel No. :



**DECLARATION AND SIGNATURE**

The information supplied in this application form is accurate to the best of my knowledge. I understand that if it is subsequently discovered that any statements are false or misleading, I will be liable to have my application disqualified or subsequently will be liable to be dismissed from employment by the Company.

PRINT NAME .....

SIGNATURE .....

DATE .....



If you require extra space for any of the questions please use a separate sheet of paper.

Elliott Baxter & Company Limited is an equal opportunities employer. A copy of our policy is available upon request.

Please return the completed application form in the envelope provided. Please note a stamp will be required for the return post.

**FOR OFFICE USE ONLY:**

Applicant's Name :  
Job applied for :  
Branch :

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Date Application rec'd :  
Interview granted : Yes / No  
Interview Date :  
Interviewer :  
Interview notes (if using a separate sheet, please attach to this form)

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2nd Interview yes / No (if yes, please give date)

If application unsuccessful, 'no thank you' letter sent? date :

Closing notes:

Start date agreed : Salary : £

Immediate Manager/Director : Hours :

Job offer letter sent :

Print & sign name ..... Date .....