

Employment Application



Application date

Your Contact Information

Full Name

Address

Date of Birth

Are you eligible to work in the UK? Yes No

Phone

Email

Status (please tick) Single Married Widowed Divorced

Education

Please give details and list any examinations passed or qualifications gained

What are your hobbies and interests?

Driving Experience/Licence Details

Certain positions within the company may require use of a car/truck. If this is the case please complete this section. Successful applicants will require a DVLA licence check prior to employment.

Date car driving test passed

Date LGV driving test passed

Class

List endorsements or bans and provide dates

Date(s)

Conviction category

Penalty points/Period of ban

List any other non-driving convictions

List accidents in the last 3 years

Describe the types of vehicle, loads and journeys that you have experience of

Medical Information

Weight

Height

Are you colour-blind?

Yes

No

Do you wear a hearing aid?

Yes

No

Do you have any medical restrictions for the position you are applying?

Are you willing to have a medical examination?

Yes

No

Previous Employment

Date worked: From _____ To _____

Employed as _____

Name of employer _____

Address _____

Reason for leaving _____

Date worked: From _____ To _____

Employed as _____

Name of employer _____

Address _____

Reason for leaving _____

General

Length of notice required by present employer _____

Please give any other information you wish to provide in support of this application