



Employment Application Form

The following information will be treated in strictest confidence.
(Please complete fully in Block Capitals)

Position Applied For: _____ Where did you hear about us? _____

Employment Status Full Time Part Time Temporary

Please outline the hours/shifts you are available to work: _____

Personal Details

First Name: _____ Surname: _____

Address: _____

_____ Post Code: _____

Telephone: _____ Mobile: _____ Business: _____

How do you intend to travel to work: _____

Employment Details

Are you currently employed Yes/No

Name of current or last employer: _____

Address: _____

Nature of Business _____ Telephone Number: _____

Job Title and a brief description of the duties: _____

Length of Service From: _____ To: _____

How much notice are you required to give to your current employer? _____

Please give details of your past employment, excluding your present or last employer, stating with the most recent.

<i>Name and address of employer</i>	<i>Dates</i>	<i>Position Held/Main Duties</i>	<i>Reason for Leaving</i>

Education

Secondary School	From	To	Examinations & Results
College or University	From	To	Examinations & Results

Further Formal Training	From	To	Certificate/Qualification
Job Related Training Courses Name of Organisation	Date	Subject	

Please give details of membership of any technical or professional associations:

Please list any foreign languages spoken and the level of competence:

Interests, Achievements, Leisure Activities (e.g. hobbies, sports, club memberships):

Supplementary Information (Please set out below any further information to support your application, e.g. past achievements, Future aspirations, personal strengths, etc.)

Additional Information

Are you involved in any activity that might limit your availability to work or your working hours e.g. local government? If 'yes', please give details:	Yes/No
Are you subject to any restrictions or covenants that might restrict your working activities? If 'yes', please give details:	Yes/No
Have you any convictions (other than spent convictions under the Rehabilitation of Offenders Act 1974)? If 'yes', please give details:	Yes/No
If called for interview, are there any adjustments we should make to enable you to attend? If 'yes', please give details:	Yes/No
Have you ever worked for this business before? If 'yes', please give details:	Yes/No
Do you need a work permit to take up employment in the UK? If 'yes', please give details:	Yes/No
Do you have any holidays planned within 12 months following the date of application? If 'yes', please give details:	Yes/No
You are required as part of your application to complete the attached Medical Questionnaire. Are you prepared to undergo a medical examination prior to employment?	Yes/No

Declaration

I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable to summary dismissal.

Signature:	Date:
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References

Please give the names of two people (One of whom should be your present or most recent employer) whom we may approach for a reference. Can we approach your current employer before an offer of employment is made? Yes/No

Name:	Name:
Position:	Position:
Address:	Address:
Tel. No:	Tel. No:

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