



## APPLICATION FOR EMPLOYMENT

This application is part of the selection process so please complete the form fully. The information provided on this application form will be processed in accordance with Jersey Legislation which protects your privacy and access rights.

Position applied for:		Today's date:	
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### PERSONAL DETAILS

Surname:	Forename(s):
	Preferred name:
Title: (Mr/Mrs/Miss/Ms)	
Contact address:	Home telephone:
	Mobile telephone:
Post code:	E-mail address:

### EDUCATION

You may have already provided details of your education and previous employment in your CV. Please complete any details **NOT** included in your CV below.

Secondary school(s) attended	Dates	Qualifications
College/University	Dates	Qualifications

### TRAINING COURSES ATTENDED

Training organisation	Dates	Course title/Qualification



**EMPLOYMENT HISTORY**

Starting with your present or most recent post, list in descending order each position of employment you have held. Please give names and addresses of employers in order for us to complete a full 3 year employment reference check if you are successful. **Without this information your application will not be considered.**

<b>Present or most recent employment</b>			
Date from:	Date to:	Salary:	Title of post:
Other benefits:			
Name and address of employer:			
Period of notice:		Nature of business:	
Reason for leaving:			
Description of your duties:			

**PREVIOUS EMPLOYMENT**

Dates		Name and address of employer	Title of position and main duties	Reason for leaving
From	To			



**If there is a gap of more than one month in employment history, please give details below:**

**GENERAL INFORMATION**

**RESIDENCY STATUS**

Under the Control of Housing and Work (Jersey) Law 2012 what is your current status: Please select one of the following

Registered  Entitled for work  Entitled  Licensed

**MEDICAL HISTORY**

How many days sickness have you had in the last 3 years?

Give brief details of any serious illness, operations or disabilities that may affect your ability to perform the job you are applying for:

Do you need any special aids/adaptations to assist you at work, whether or not you have a disability?

Are you having, or waiting for, treatment or investigations of any kind at present?

Have you ever had any health problems which may have been caused or made worse by work?

EMPLOYMENT MAY BE SUBJECT TO A MEDICAL EXAMINATION

**CRIMINAL CONVICTIONS**

Please give details of any criminal convictions you have that are considered 'unspent' in accordance with the Rehabilitation of Offenders (Jersey) Law 2001:

If you have no details to provide, please write 'none'.

EMPLOYMENT MAY BE SUBJECT TO A POLICE CHECK

**DRIVING LICENCE**

Do you hold a valid driving licence for a motor car? YES /NO

Have you been convicted of any driving offences during the last five years? YES /NO   
 If yes, please give full details

**EMPLOYMENT**

Have you ever been the subject of a company's formal disciplinary procedure?

Have you ever been dismissed from previous employment?



**INTERVIEW**

Are there any dates you are not available for interview in the next 3 weeks?

**SPECIFIC QUESTIONS**

**What, in your own words, do you understand KPServices (Jersey) Limited provides?**

**What qualities would you bring to this role?**

**How would you describe success for you in 5 years time?**

**Roles require you to be fully flexible and work shifts, could you commit to this?**

Yes  / No

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By returning this form I hereby declare that the details shown are correct and complete to the best of my knowledge. I understand that any false statements or the withholding of any relevant information may provide grounds for rejection of my application, or termination of my contract of employment. I understand that KPServices (Jersey) Limited will create and maintain manual and computerised records on me during my employment, and may retain those records after my employment has ceased, subject to the Data Protection (Jersey) Law 2005.