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| FOR INTERNAL USE ONLY: |
|  **Post Applied for**: |  | **Application Reference:** |  |
| **Closing Date:** |  | **Interview Date:** |  |
| **CCL Interiors LTD Job Application Form** |
| Please complete this form and the Monitoring Form and return to;HR Department CCL Interiors Ltd Unit 4 Harbour Court5 Heron Road BelfastBT3 9HBOrEmail to info@ccl-interiors.comPlease note that the Monitoring Form is separated from your application and is not used in the selection process.  |
| THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE |

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| **Personal Details** |
| FIRST NAME: |   | LAST NAME: |   |
| ADDRESS: |   |
| TOWN: |   | POSTCODE: |   |
| HOME TELEPHONE: |   | MOBILE TELEPHONE: |   |
| EMAIL ADDRESS: |   |
| NATIONAL INSURANCE NUMBER: |   |
| Are you free to remain and take up employment in the UK with no current immigration restrictions?*As an employer CCL Interiors Ltd needs to know if it is legal for you to work in the UK. You will need to show proof of your right to work.* | YES |   |
| NO |   |

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| **Current Employment** |
| Please give details of your current employer (If unemployed give details of last employer) |
| Name of Employer: |   |
| Industry: |   |
| Address: |   |
|  |  |
| Town: |   | Postcode: |   |
| Post Title: |   |
| Date of Appointment: |   | Notice Period / Date of Leaving: |   |
| Salary: |   |
| Reason for Leaving: |   |
| Describe the main activities of your current/most recent job:  |

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| **Previous Employment** *(Please cover the last 10 years and list most recent first)* |
| DatesFrom To | Employers Name and Address | Position Held | Reason for Leaving |
|   |   |   |   |
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| PLEASE CONTINUE ON A SEPARATE SHEET IF NECESSARY |

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| **Education** |
| College or University | Course | Qualification/s Obtained |
|  |   |   |
| School | Subjects | Qualification/s Obtained |
|   |   |   |
| PLEASE CONTINUE ON A SEPARATE SHEET IF NECESSARY |

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| **Professional or Technical Training/Qualifications** |
| Course | Professional / Technical Qualification |
|   |   |
| PLEASE CONTINUE ON A SEPARATE SHEET IF NECESSARY |

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| **Professional Membership** |
| Professional Institution | Dates of Membership | Level of Membership |
|   |   |   |
| PLEASE CONTINUE ON A SEPARATE SHEET IF NECESSARY |

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| **Supporting Information** |
| Please give any further details of your suitability for this position:  |

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| **References** |
| Please provide two referees, one of which should be your most recent employer. A formal offer of employment following interview will only be made once both references have been received.  |
| First Name: |   | First Name: |   |
| Last Name: |   | Last Name: |   |
| Organisation: |   | Organisation: |   |
| Job Title: |   | Job Title: |   |
| Work Relationship: |   | Work Relationship: |   |
| Address: |   | Address: |   |
| Town: |  | Town: |   |
| Postcode: |   | Postcode: |   |
| Work Telephone: |   | Work Telephone: |   |
| Mobile Telephone: |   | Mobile Telephone: |   |
| Email Address: |   | Email Address: |   |

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| **Declaration** |
| I confirm that the information in this application form is correct and that I have not omitted any relevant details. I understand that any false or misleading information, or material which was wilfully suppressed, may result in this application not being pursued, or if appointed, may result in my contract being terminated. |
| Signature: |   | Date: |   |