



TEAM MEMBER APPLICATION FORM

Your application form is an important part of our selection process. Please answer all questions accurately and as fully as possible using capital letters. If you are successful it will form the basis of your records held by the company.

PERSONAL DETAILS:

Surname

First Name

Home Address

.....

.....

Home Telephone No

Mobile Telephone No

Date of Birth

EDUCATION:

Last school or college attended

.....

Education & training courses undertaken

.....

.....

.....

EMPLOYMENT:

Please give details of your employment or circumstances over the last 5 years with dates

From To

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Have you ever worked for Laurel before? ... Yes/No

What sessions could you work?

(Please note these are inclusive of bank holiday working)

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

When can you start work?

Do you require a work permit?

(Applies to Non-UK residents only) Yes/No

If 'Yes' do you have a work permit? Yes/No

Can you provide your N.I. number and

bank account details on your first day? Yes/No

Give details of any criminal convictions you have:

If none write 'N/A'

.....

.....

.....

.....

.....

REFERENCES:

Please give the name, address and telephone number of 2 referees, one of whom must be a former employer if you have worked before:

Name:

Position:

Address:

.....

.....

.....

Telephone No:

Name:

Position:

Address:

.....

Telephone No:

TEAM MEMBER APPLICATION FORM

PLEASE ANSWER THE FOLLOWING AS FULLY AS POSSIBLE

Teamwork is important in the job you have applied for. What skills do you have that make you a good teamworker?

We need you to be calm under pressure. Describe a recent situation when it was 'all systems go' at home or at work. Say how you kept your head.

What do you think makes a good pub for the customer?

What do you think is required if we ask for a neat and tidy appearance?

Describe a work or home situation when you had to be flexible to accommodate other people's needs:

Do you have any health problems that may affect your ability to do this job? Yes/No
Do you or have you had any skin/medical complaints that may affect your ability to handle food? Yes/No
Do you or have you in the past suffered from any back complaints? Yes/No
How many days sickness have you had in the last 12 months?

The Laurel Pub Company carefully monitors the opportunity for employment for all members of the community. Please indicate your cultural or ethnic background by placing a tick below the appropriate heading.

African	Caribbean	Asian	UK-European	Other European	Oriental	Other please specify

I declare that the information I have given is to the best of my knowledge true and I understand that any offer is subject to satisfactory references and medical clearance. I understand that any misleading or inaccurate information will be sufficient grounds for withdrawing any offer of employment or terminating employment.

Signed: Date: **Thank You!**