

# SPECIAL CARRIER Application for Employment

**PRIVATE AND CONFIDENTIAL**

**Please complete in BLOCK CAPITALS**

Pay Reference Number:  Applicant Reference Number:

Position applied for:

How did you hear of this vacancy? (include date) \_\_\_\_\_

## A. PERSONAL PARTICULARS

Full Name: Mr/Ms/Mrs/Miss		Telephone Number (including STD Code)	
Address:		Home:	
		Mobile:	
		Business (Tick box if you do not want to be Contacted at work). <input type="checkbox"/>	
e-mail address:		Do you need a work permit to take up Employment in the U.K.? Yes/No	
Date of Birth:	Age:		
Marital Status:		Detail:	
N.I. Number:			
Driving Licence Number:			
Driving Licence Address and Postcode:			

## B. NEXT OF KIN DETAILS

Name & Address		Relationship	Telephone No.

**C. DRIVING DETAILS**

Date passed Driving test	Classes of Licence		Have you driven in Europe	If yes, where
	YES	NO	Valid from	Valid to
Drivers CPC card				
Digital tachograph card				

Have you had any motoring accidents in the last 3 year

**D. DRIVING CONVICTIONS**

Offence	Date		Points	Sentence or Fine
	From	To		

**E. EMPLOYMENT HISTORY**

Please list starting with the most recent, all the organisations for which you have worked during the last 10 years:

Name(s) and Address(es) of Employer(s)	Dates		Position Held/ Main Duties	Starting/ Leaving Salary	Reason for Leaving
	From	To			

**F. HEALTH**

Are you in good health? If No, please give further information:	Yes / No
Have you ever suffered from any serious illness or had any major operation? If Yes, please give details:	Yes / No
Are you prepared to undergo a medical examination prior to employment?	Yes / No

**G. SUPPLEMENTARY INFORMATION**

Please give details of any experience, skill or achievements which you feel may be relevant in your application for employment. (Continue on separate sheet if necessary).

Please give dates of any holidays arranged:

Do you have any commitments which might limit your working hours? Yes / No

If Yes, please give details:

Are you willing to work weekends when required? Yes / No

Have you ever been convicted of a criminal offence: (which is not a spent conviction under the Rehabilitation of Offenders Legislation). Yes / No

If Yes, please give further information:

How much notice are you required to give to leave your present employment?

How will you travel to and from work?

Can we contact you 24 hours a day Yes / No

Please list your interests, sports, hobbies, etc.

**H. REFERENCES**

Please give the names and addresses of two referees who are not related to you, who we can approach for a confidential assessment of your suitability for this job. (One of these must normally be a previous employer).

Can we approach your present/most recent employer? Yes / No

(Tick in box if you do not wish your employer to be contacted before an offer of employment is made)

Name, Position, Address and Telephone Number	Name, Position, Address and Telephone Number

**DECLARATION OF APPLICANT**

I confirm that the above information is correct.

I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable for dismissal.

I consent to the Organisation processing the information contained herein. I understand that, if successful, the information will be used to form my personnel record and will be retained for the duration of my employment and I consent to the Organisation applying on line every 6 months to confirm my driving licence details are correct and any endorsements are up to date, For this agreement you need to understand that details of your DVLA record and National Insurance number will be shared with other government departments (HMRC and DWP) to check your identity, as described in the DVLA privacy policy <https://www.gov.uk/privacypolicy> and that you would like the Company to use this service and understand that your data will be shared as explained above.

If I am not successful, I understand that the Organisation will retain the form for a maximum of 6 months, and they may use it to contact me in the event of there being any other vacancies for which I may be suitable.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

**FOR OFFICE USE ONLY**

**INTERVIEW RECORD**

Interviewed by:	Date:		
Decision: (Tick as applicable)	Reject <input type="checkbox"/>	Further Interview <input type="checkbox"/>	Accept <input type="checkbox"/>
Interviewer's report and reasons for decision:			
			Rejection letter sent: Yes / No

**The Special Carrier Limited**  
**Express House Kedelston Road**  
**White Cliffs Business Park Whitfield**  
**Dover Kent CT16 3NX**  
**Tel. 01304 820999 Fax. 01304 820990**

[www.specialcarrier.com](http://www.specialcarrier.com)

[info@specialcarrier.com](mailto:info@specialcarrier.com)