



THE DINTON HERMIT

PASSION PUBS LTD APPLICATION FOR EMPLOYMENT FORM

PLEASE COMPLETE ALL SECTIONS OF THE FORM CLEARLY IN BLUE OR BLACK INK

Position applied for: _____

Full time/part time (please delete)

PERSONAL DETAILS	
Surname:	
Forename:	Title:
Address:	
	Postcode:
Home telephone:	Work telephone:
Mobile telephone:	Private email:

GENERAL EDUCATION		
School (from age 11)	Subject, Qualifications & Grade	Year
Further Education or Training	Subject, Qualifications & Grade	Year

PRESENT EMPLOYMENT	
Position held:	
Name & address of employer ~ include post code	
Date appointed:	
Present salary:	
NI Number:	
Notice required:	
Reason for seeking new employment:	
Brief description of duties	

PAST EMPLOYMENT (Most recent first, last 5 years only. Continue on separate sheet if necessary)				
Employer	Position held and principal duties	Dates from/to	Salary	Reason for leaving

REFERENCES	
Please give names and addresses of 2 professional referees, one of whom must be either your present or previous employer. Do not use 2 referees from the same organisation. Names of friends and relatives MAY NOT be used. References will not be taken up without your prior consent.	
1. Name:	2. Name:
Job Title:	Job Title:
Address:	Address:
Postcode:	Postcode:
Telephone No:	Telephone No:
Email:	Email:
Relationship:	Relationship:

Do you require a work permit to work in the UK

YES/NO

Have you ever been convicted of a criminal offence which is not spent under the Rehabilitation of Offenders Act 1974?

If yes, please give details

YES/NO

Any information given may be held on computer and therefore falls within the provision of the Data Protection Act 1998.

Any information given will be completely confidential.

I confirm that the information provided on this form and within my CV, if applicable, is both truthful and accurate. I have omitted no facts that could affect my employment. I understand that my employment by Passion Pubs Ltd is subject to documentary evidence of my right to work in the UK, verification of any relevant qualifications and subject to satisfactory references. I expressly consent to any sensitive or personal data, disclosed as part of my application, being used in connection my application, subject to the relevant Data Protection legislation.

I will inform Passion Pubs Ltd immediately of any circumstances that may affect my work, such as changes to health, subsequent pending prosecutions or convictions, which may arise whilst I am employed by Passion Pubs Ltd.

Signed: _____

Date: _____

This completed form to be returned to:

Passion Pubs Ltd
t/a Dinton Hermit
Water Lane
Ford
Aylesbury
HP17 8XH

Equal Opportunities

At Passion Pubs Ltd we are committed to an Equal Opportunities Policy. The aim of the policy is to ensure that no job applicant or employee receives less favourable treatment on the grounds of sex, race, colour, national or ethnic origin, religious belief, marital status, sexuality, age or disability and they are not disadvantaged because of job conditions or requirements that can not be justified.

To ensure that our policy is operated effectively and for no other purpose Passion Pubs Ltd. maintains records of gender, race, ethnic origin, disability and age.

Regular monitoring of such records provide the basis for appropriate action to eliminate unlawful direct and indirect discrimination and provide equality of opportunity.

To help us ensure the compliance of this policy, please complete the Equal Opportunities Monitoring Form.

These details will be detached from your application form and excluded from the shortlisting process.

1. Sex Male Female
2. Date of Birth: _____
3. Marital Status: Married or single with equivalent responsibilities
 Single Widowed Divorced
4. Have you any dependants? Yes No
5. Nationality: _____
6. How would you describe your ethnic origin?
- | | | | |
|-------------------------------|--------------------------|-------------------------------|--------------------------|
| White | | Black or Black British | |
| A. British | <input type="checkbox"/> | M. Caribbean | <input type="checkbox"/> |
| B. Irish | <input type="checkbox"/> | N. African | <input type="checkbox"/> |
| C. Any other white background | <input type="checkbox"/> | P. Any other black background | <input type="checkbox"/> |
| Mixed | | Other Ethnic Groups | |
| D. White and black Caribbean | <input type="checkbox"/> | R. Chinese | <input type="checkbox"/> |
| E. White and black African | <input type="checkbox"/> | S. Any other ethnic groups | <input type="checkbox"/> |
| F. White and Asian | <input type="checkbox"/> | Z. Not stated | <input type="checkbox"/> |
| Asian or Asian British | | | |
| H. Indian | <input type="checkbox"/> | | |
| J. Pakistani | <input type="checkbox"/> | | |
| K. Bangladeshi | <input type="checkbox"/> | | |
| L. Any other Asian background | <input type="checkbox"/> | | |
7. Do you consider yourself as having a disability? Yes No

The Disability Discrimination Act 1995 defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long term effect on his or her ability to carry out normal day-to-day activities.

(If yes please describe the nature of your disability/impairment in relation to this job role)

8. Do you have a medical or physical condition which may require specific consideration at interview or in employment?

Yes

No

If yes please give details _____

HAVE YOU EVER HAD ANY OF THE FOLLOWING CONDITIONS (delete as appropriate)		IF YES:	
		HOW LONG OFF WORK	DETAILS
Allergy to any drugs (including any substances) or Hay fever	YES/NO		
Asthma or Breathlessness, Bronchitis, Pneumonia	YES/NO		
Back trouble or Joint trouble	YES/NO		
Bowel trouble	YES/NO		
Chest pain, Heart trouble	YES/NO		
Depressive illness	YES/NO		
Diabetes	YES/NO		
Dizziness or fainting attacks	YES/NO		
Epilepsy, fits or blackouts	YES/NO		
Hernia or Rupture	YES/NO		
Jaundice	YES/NO		
Kidney trouble	YES/NO		
High blood pressure	YES/NO		
Migraine	YES/NO		
Repetitive Strain Injury	YES/NO		
Rheumatic fever	YES/NO		
Rheumatism	YES/NO		
Skin trouble, i.e. dermatitis	YES/NO		
Stomach ulcer	YES/NO		
Swollen legs or varicose veins	YES/NO		