

PUB STAFF

APPLICATION FORM

**Waggon Inn
10 Coalmarket
Kelso**

In order to give your application full consideration would you please complete the enclosed questions?

FULL NAME _____

Please tell us a telephone number where you can be contacted:

DAYTIME _____

EVENING _____

E-MAIL: _____

CONFIDENTIAL

PLEASE USE BLOCK LETTERS THROUGHOUT

JOB APPLIED FOR: _____ **WHEN AVAILABLE TO START:** _____

ADDRESS: _____ **DATE OF BIRTH:** _____ **AGE NOW:** _____

_____ **NATIONAL INSURANCE No:** _____

_____ **POST CODE** _____ **NEXT OF KIN:** _____

LIST DETAILS OF CURRENT JOB BELOW:

Employers Name & Address	Dates From To	Job Title	Reason for Leaving	Wage
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LIST OF PREVIOUS EMPLOYMENT BELOW:

Employers Name & Address	Dates From To	Job Title	Reason for Leaving	Wage
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WE RESERVE THE RIGHT TO CONTACT PREVIOUS EMPLOYERS FOR REFERENCES

LIST ANY SPECIAL QUALIFICATIONS YOU MAY HAVE:

ARE YOU A QUALIFIED FIRST AID PERSON?

YES / NO

HOW WILL YOU TRAVEL TO AND FROM WORK?

**HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENCE?
OR HAVE A CASE PENDING?
IF YES, GIVE DETAILS: -**

YES / NO

**HAVE YOU OR ANY RELATIVES OR FRIENDS WORKING FOR US?
IF YES, WHOM?**

YES / NO

**HAVE YOU EVER WORKED IN THIS PUB BEFORE?
IF YES, GIVE DETAILS:**

YES / NO

**HAVE YOU EVER WORKED IN LICENCED PREMISES BEFORE?
IF YES, GIVE DETAILS**

YES / NO

**HAVE YOU EVER HANDLED CASH WITH CUSTOMERS BEFORE?
IF YES, GIVE DETAILS**

YES / NO

**HAVE YOU HAD ANY TRAINING WITH OTHER COMPANIES
ON CUSTOMER CARE AND SERVICE?
IF YES, GIVE DETAILS**

YES / NO

TELL US WHAT YOU LIKE TO DO WHEN YOU ARE NOT WORKING:

WORKING TIMES

Opening hours may vary each day. Monday to Sunday
If you could choose the hours you wanted to work, what would they be?
Please write them below, next to that day.

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

SUNDAY

Are there any days or times that you definitely would not be able to work?
(e.g. Weekend/Bank Holidays/School Holidays) If **YES** please give details:

To the best of my knowledge the information I have given is complete and correct.
I agree that any misrepresentation made by me will result in the cancellation of my application and termination of any employment with the company.

Signed: _____ **Date:** _____

FOR OFFICIAL USE ONLY

Interviewed By: _____ **Date:** _____
Comments: