

# NORMAN PRECISION LLP

Unit 3 The Brunel Centre, Stroudwater Business Park, Brunel Way,  
Stonehouse, Gloucestershire, GL10 3SX

## APPLICATION FOR EMPLOYMENT

*Please complete this form legibly in your own handwriting, and in black ink.  
All information supplied will be treated as strictly Confidential*

POST applied for .....

**PERSONAL PARTICULARS**

Surname .....	Previous
Surname(s).....	
First name(s) .....	
Address	
.....	
.....Post Code	
.....	
Home Tel. No. ....	Mobile
Tel.....	
Date/Place of Birth .....	Nat Ins Number
.....	

**EDUCATION**

Secondary School(s) attended – Name & Town	From	To

**Further/Higher Education/Training**

College or University/Company	Course Attended	Full or P/T	From	To

**Qualifications Obtained** (To include school, degree & professional examination results)

Exam/Qualification	Grade	Year	Exam/ Qualification	Grade	Year

**Membership of Professional Bodies**

Name of Body	Type of membership	Date(s)

**EMPLOYMENT RECORD** - (You **MUST** supply your employment record for at least the LAST TEN YEARS. Please start with your most recent/current employment and include periods of unemployment) - **Please note that if you do not provide full details of your employers or referees, you may not be offered an interview or position. Please also note that any offer of employment will be provisional until all vetting procedures have been satisfactorily completed - usually within 13 weeks. Should you fail to provide further information as requested in this period, your employment will be terminated.**

Employers name and address (including post code) & Tel Number Please include contact name	Position in which employed	From		To		Grade/Salary	Vetting use only
		M	Y	M	Y		
Reason For Leaving:							

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		M	Y	M	Y		
Reason For Leaving:							

**Please list all periods of Unemployment**

From	To	Office at which Registered / Signing-On	Vetting use

*Please continue overleaf if necessary*

**May we approach your current employer for information prior to the offer of a position?**  
**YES / NO**

**IDENTIFICATION**

Document*	Issue / Personal Number	Seen By - Date	Copied 3
a. Passport			
b. Driving Licence			
c. Other? (Please specify) Eg Utility Bill with address			

\*You need to bring either (a) or (b) and (c) with you to any subsequent Interview you may attend.

**PERSONAL CHARACTER REFEREES**

Please supply the details of two persons who have known you for a minimum period of 5 years who would be prepared to supply references for this type of employment. They should not be your relative.

Name /Address /Post code /Tel/Fax Nos.	Relationship eg Friend / Other	Vetting use
1.		
2.		

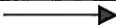
**REHABILITATION OF OFFENDERS ACT 1974**

***It is the Company's Policy not to employ persons whose record shows them to have Unspent Criminal Convictions. We therefore request that you disclose any Unspent Convictions including Motoring Offences and official Cautions including any actions that may be pending. We also request that you include Bankruptcy dealings and County Court Judgements for debt.***

**Do you have any Criminal Convictions, Spent or Unspent? YES / NO\* (Delete as appropriate)**

***Please list below any unspent criminal convictions/cautions or any CCJs. You should note that failure to declare an unspent conviction is a criminal offence. If in doubt please take proper advice.***

Date	Court / Offence	Result/ Judgement

**Please continue on the rear of the form if necessary** 

**Extended Hours Working**

*Due to the nature of the business, there is often a need to ask staff to work overtime. In order to comply with the Working Time Directive(s), you are asked to agree to work over an average 48 per week (over a 26 week period). You may cancel this agreement at any time by giving the Company three month's notice in writing.*

**I consent to my normal working hours being extended to above the maximum (48) allowed under the Working Time Directives. I also understand that if I wish to revoke this agreement, I must give three month's notice in writing to the Company.**

**Signed :** \_\_\_\_\_ **Date:** \_\_\_\_\_

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***Please complete the following section. It will be used in any subsequent Interview you may be invited to attend.***

**EXPERIENCE**

*Please include any positions of responsibility, training courses etc.*

**REASONS FOR APPLYING**

*Why have you applied for this position? What do you consider that you can bring to the job?*

**OTHER INFORMATION**

*Is there any other information that you consider relevant to your application?*

## ***Health and Safety Medical Questionnaire***

The information given is kept entirely confidential and is needed to ensure the Safety of you and others.

Any points of uncertainty can be discussed further during your initial interview.

Please circle if any of the following apply or have applied in the past to you.

Please give details below where appropriate.

Circulatory problems such as varicose veins, phlebitis, thrombosis	Yes / No
Heart problems such as angina, high blood pressure, heart attack	Yes / No
Chest problems such as asthma	Yes / No
Diabetes	Yes / No
Epilepsy or fainting attacks	Yes / No
Skin disorders	Yes / No
Recent operation or fracture	Yes / No
Any current medication	Yes / No
Back trouble, arthritis, rheumatism	Yes / No
Injury to bones, joints, tendons, including wrist tendons	Yes / No
A claim for industrial injury etc	Yes / No
Have you worked in an industry with high noise levels	Yes / No
Any other significant health problems (eyes, hearing, skin)	Yes / No
Details	

## DECLARATION

The facts set out in this Application Form are true to the best of my knowledge and belief. I understand that any misrepresentation or failure to disclose relevant information may result in an offer of employment not being made, in dismissal or prosecution. I understand that personal data supplied may be held or verified on or by a computer (Data Protection Act 1984). I also consent to inquiries being made to verify the facts stated above, including those held under the Data Protection regulations. I also understand that the completion of this form in no way constitutes an offer of employment.

Signed ..... Date .....

Send completed application forms to:

***For the att of Kevin Norman,  
Norman Precision LLP,  
Unit 3 The Brunel Centre,  
Stroudwater Business Park,  
Brunel Way, Stonehouse,  
Gloucestershire,  
GL10 3SX***