

APPLICATION FORM

*PLEASE RETURN THIS COMPLETED FORM TO:

ARGO FEEDS LTD
KIRKWOOD MILL
PENISTONE
STH YORKS
S36 6HQ

APPLICANT (please complete in ink in block capitals)

POSITION REQUIRED: FULL TIME OFFICE / SHOP VACANCY

FORENAME(S):	DO YOU HAVE A CURRENT CLEAN DRIVERS LICENCE: YES / NO
SURNAME:	FOR WHAT CLASSES OF VEHICLE:
HOME ADDRESS:	NUMBER OF PENALTY POINTS ON CURRENT DRIVING LICENCE:
	HAVE YOU EVER HAD YOUR DRIVING LICENCE REVOKED: YES / NO
	DO YOU HAVE YOUR OWN TRANSPORT: YES / NO
TEL. NO. (HOME):	YOU'RE LIVING ACCOMODATION: OWNER / RENTED / LIVING WITH PARENTS
MOBILE NO.:	
E-MAIL (HOME):	
DATE OF BIRTH:	

GENERAL EDUCATION – Please give details of schools attended in date order.		
FROM	TO	NAME OF SCHOOL:
FURTHER EDUCATION / TRAINING – Please give details of College / Organisation attended in date order.		
FROM	TO	NAME OF ORGANISATION:

EXAMINATION RESULTS / QUALIFICATIONS OBTAINED					
DATE	SUBJECT / QUALIFICATION	GRADE	DATE	SUBJECT / QUALIFICATION	GRADE

DETAILS OF PRESENT EMPLOYER (or last job if currently unemployed)	
DATE FROM: _____ DATE TO: _____	RESPONSIBLE TO: _____
YOUR JOB TITLE: _____	YOUR MAIN DUTIES: _____
EMPLOYERS NAME & ADDRESS: _____	
NATURE OF BUSINESS: _____	AVERAGE HOURS WORKED (INC. OVERTIME): _____
	BASIC PAY (BEFORE DEDUCTIONS): £.....PER ANNUM OR £.....PER HOUR
REASON FOR LEAVING / WANTING TO LEAVE: _____	

DETAILS OF PREVIOUS EMPLOYMENT (In date order, most recent first)	
DATE FROM: _____ DATE TO: _____	RESPONSIBLE TO: _____
YOUR JOB TITLE: _____	YOUR MAIN DUTIES: _____
EMPLOYERS NAME & ADDRESS: _____	
NATURE OF BUSINESS: _____	REASON FOR LEAVING: _____

DETAILS OF PREVIOUS EMPLOYMENT (In date order, most recent first)	
DATE FROM: _____ DATE TO: _____	RESPONSIBLE TO: _____
YOUR JOB TITLE: _____	YOUR MAIN DUTIES: _____
EMPLOYERS NAME & ADDRESS: _____	
NATURE OF BUSINESS: _____	REASON FOR LEAVING: _____

DETAILS OF PREVIOUS EMPLOYMENT (In date order, most recent first)	
DATE FROM: _____ DATE TO: _____	YOUR MAIN DUTIES: _____
EMPLOYERS NAME & ADDRESS: _____	
NATURE OF BUSINESS: _____	REASON FOR LEAVING: _____

GENERAL DETAILS:

SUMMARY OF YOUR PRACTICAL / SPECIALIST SKILLS ACQUIRED

WHAT ARE YOUR MAIN INTERESTS?

DO YOU HAVE ANY OTHER EMPLOYMENT (Including part-time/night work) WHICH YOU INTEND TO CONTINUE?
(If yes give details)

YES / NO

HAVE YOU EVER BEEN DISMISSED FROM EMPLOYMENT?
(if yes give reason)

YES / NO

DECLARATION: (Please read carefully, then sign and date your application)

I confirm that the above information is correct and I consent to it being processed for the purposes of recruitment. I also understand that misleading statements may be sufficient grounds for cancelling any agreements made and that questions left unanswered may be discussed at interviews arising from this application.

APPLICANT SIGNATURE:

DATE:

FOR OFFICE USE ONLY