



Employment Application Form

Please complete all sections in Black Ink using Block Capitals where possible.

Employment Application Form

Confidential

Section 1: Personal Details

Title:		Surname:	First Name(s):
Address:		Tel(Home):	Todd Insurance welcomes applications from people with disabilities. The Disabilities Discrimination (NI) Act 1995 describes a disability as a physical or mental impairment, which has a substantial and long term adverse effect on a person's ability to carry out normal day-to-day activities. Having read this definition, do you consider yourself to have a disability?
		Do you have a Current Driving Licence?	
Postcode:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Email Address:			

National Insurance Number

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Section 2: Qualifications

Please list any qualifications gained

Qualification	Level	Grade	Date Obtained

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Continue on a separate sheet if necessary

Section 3: Career History

Please outline your career history starting with your current role

Name, Address and Business of Employer	Dates	Position and Nature of Duties

Continue on a separate sheet if necessary

Section 4: Present Employment

Why do you wish to leave your present position?	
What period of Notice does your current employer require?	
May we contact your present employers?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Present Salary (per annum)	
How many days have you lost to illness in the last two years	
Please give details of the above	

Section 5: Further Details to Support your Application

<p>Please state how you meet the essential and desirable criteria needed for the post outlined and any relevant experience you may have.</p>
<p>Please give details of any training courses you have attended</p>
<p>Please give details of any interests you may have i.e sports, games, societies, music etc.</p>

Section 6: References

Please name two referees, at least one of whom should have knowledge of your present work or most recent and be in a supervisory/managerial capacity. Close relatives should not be named as referees. Application for references will only be made if you are made an offer of employment.

Name	Name
Position/Organisation	Position/Organisation
Address	Address
Telephone	Telephone

Declaration

Criminal Convictions

Have you ever been convicted of a criminal offence by a Court of Law or similar Judicial body which is not legally spent within the meaning of the Rehabilitation of Offenders Act 1974? Yes No

If you are unsure about this please contact our HR Department. This excludes driving offences, unless a custodial sentence was received.

If yes, information given must include dates of conviction(s), nature of the offence and any restriction(s) placed as a result:

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Providing such detail will not necessarily prevent you from being appointed nor will any of the above be treated as an automatic reason for dismissal, in accordance with the Company's disciplinary policy.

Financial Status

Have you ever been declared bankrupt or served with a bankruptcy notice, unless the bankruptcy has been discharged?

Yes No

I declare that to the best of my knowledge, I believe all the answers I have given are true and complete, and I have not knowingly withheld information. I understand that any false or misleading statement or any significant omission may disqualify an offer of employment or render me liable for dismissal. I understand that any job offer may be subject to the satisfactory outcome of a pre-employment health assessment and I consent to my doctor being approached for further information, including medical reports, if it is considered necessary.

Signature of Candidate

Date:

Please send complete form to:
10 Prospect Court,
Omagh,
County Tyrone,
BT78 1AR

If this is an interactive form downloaded from our website you may email or print using the buttons below.