

GB Fleetcare – Banbury
GB Fleetcare – Chepstow
GB Fleetcare - Lichfield
GB DAF – Gatwick
Windrush DAF - Witney

APPLICATION FOR EMPLOYMENT

GB Fleetcare Limited
Southam Road
Banbury
Oxon
OX16 2RR

Tel: 01295 270 072

Fax: 01295 263 064

POSITION APPLIED FOR:		LOCATION:	
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SURNAME:

FIRST NAME(S):

ADDRESS:

DATE OF BIRTH:
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UK?
TELEPHONE NUMBER:

DO YOU HAVE A CURRENT DRIVING LICENCE? YES/NO. IS IT CLEAN? YES/NO. IF NO GIVE DETAILS:

WHEN DID YOU PASS YOUR LGV TEST:

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE, OTHER THAN A SPENT CONVICTION UNDER THE REHABILITATION OF OFFENDERS ACT 1974? YES/NO

IF OFFERED THIS POSITION WILL YOU WANT TO WORK IN ANY OTHER CAPACITY?

PAY EXPECTED:

ON WHAT DATE WOULD YOU BE AVAILABLE FOR WORK:

HEALTH: PLEASE GIVE DETAILS OF ANY HEALTH/DISABILITY PROBLEM(S) THAT MAY BE RELEVANT TO THE POSITION SPECIFIED ABOVE:

GB FLEETCARE IS AN EQUAL OPPORTUNITIES EMPLOYER. TO ALLOW US TO MONITOR OUR WORK FORCE WOULD YOU PLEASE INDICATE THE FOLLOWING, WHICH WILL BE DISREGARDED FOR THE PURPOSES OF RECRUITMENT:

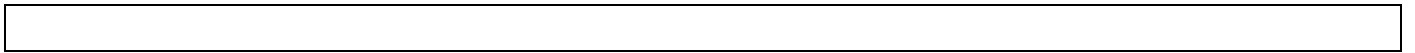
ETHNIC ORIGIN:

HAVE YOU ANY PHYSICAL CONDITION FOR WHICH YOU WOULD NEED ASSISTANCE AT INTERVIEW OR TO HELP YOU PERFORM THE JOB FOR WHICH YOU ARE APPLYING?

PLEASE NOTE THAT ALL GB FLEETCARE SITES ARE NON-SMOKING

EDUCATION

SCHOOLS	FROM	TO	EXAMINATIONS AND RESULTS
COLLEGE/UNIVERSITY	FROM	TO	COURSES AND RESULTS
FURTHER EDUCATION	FROM	TO	COURSES AND RESULTS
APPRENTERSHIP - With which Company	FROM	TO	COURSES AND RESULTS
PROFESSIONAL MEMBERSHIP AND QUALIFICATIONS			
HOBBIES AND INTERESTS			
PLEASE OUTLINE THE SKILLS AND EXPERIENCE YOU HAVE GAINED THROUGH PAID EMPLOYMENT AND OTHER WORK ACTIVITIES AND INTERESTS WHICH ARE RELEVANT TO THIS JOB			



EMPLOYMENT HISTORY

LIST BELOW PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT

NAME & ADDRESS OF COMPANY	EMPLOYED FROM: TO:	MAIN DUTIES:
	ANNUAL PAY:	
	REASON FOR LEAVING:	

NAME & ADDRESS OF COMPANY	EMPLOYED FROM: TO:	MAIN DUTIES:
	ANNUAL PAY:	
	REASON FOR LEAVING:	

NAME & ADDRESS OF COMPANY	EMPLOYED FROM: TO:	MAIN DUTIES:
	ANNUAL PAY:	
	REASON FOR LEAVING:	

NAME & ADDRESS OF COMPANY	EMPLOYED FROM: TO:	MAIN DUTIES:
	ANNUAL PAY:	
	REASON FOR LEAVING:	

NAME & ADDRESS OF COMPANY	EMPLOYED FROM: TO:	MAIN DUTIES:
	ANNUAL PAY:	
	REASON FOR LEAVING:	

NAME & ADDRESS OF COMPANY	EMPLOYED FROM: TO:	MAIN DUTIES:
	ANNUAL PAY:	
	REASON FOR LEAVING:	

NAME & ADDRESS OF COMPANY	EMPLOYED FROM: TO:	MAIN DUTIES:
	ANNUAL PAY:	
	REASON FOR LEAVING:	

The information provided on this application form will remain private and confidential and will be used for the purpose of selection/recruitment. Where the application is successful the company may, from time to time thereafter, wish to process this information (as updated periodically) for personnel administration and business management purposes. Where this is the case, processing will take place in accordance with the provisions of the Data Protection Acts 1984 and 1998. By signing this form you will be providing the company with your consent to these uses. I also give GB Fleetcare Limited permission to contact the employers listed above concerning my prior work experience.

SIGNED.....

DATE.....

if there is a particular employer(s) you do not wish us to contact please indicate which one(s):