

C M DOWNTON (HAULAGE CONTRACTORS) LTD

APPLICATION FORM FOR EMPLOYMENT

1. Position Sought: -
- | | |
|--|--------------------------|
| <i>General Haulage including up to 3 nights away</i> | <input type="checkbox"/> |
| Shunting | <input type="checkbox"/> |
| Night Trucking | <input type="checkbox"/> |
| Rigid (Multi Drop) | <input type="checkbox"/> |
| Warehouse | <input type="checkbox"/> |
| None LGV Training required | <input type="checkbox"/> |
| Administration | <input type="checkbox"/> |
| Workshop | <input type="checkbox"/> |
| Security | <input type="checkbox"/> |

2. Surname: - _____

3. First Names: - _____

4. Current Address: - _____

5. Telephone Number: - _____

6. Date of Birth
 (required for HGV applications) _____

7. National Insurance No: - _____

8. Details of any Disabilities or past serious illnesses
 Or accidents, with dates. _____

9. Are you registered as a Disabled Person? Yes/No
 If so Number of Certificate and date of expiry. _____

10. Give details of any liability for voluntary service
 in H.M. Forces, stating Branch or Service, training
 periods; annual camps etc _____

11. Education – Schools and colleges attended since age 11.

Dates		Name	Examination Results		
From	To		Year	Level	Subject and Grades

12. Industry Qualifications: - _____

13. Licences Held (please give Licence numbers)

Ordinary Driving Licence: - Yes/No _____

LGV Licence (please give details): A LGV 1 _____
 B LGV 2 _____
 C LGV 3 _____

Fork Lift Licence (please give details) A Counter Balance _____
 B Side Loader _____
 C Reach Truck _____

ADR Licence (please give Categories held) _____

14. Membership of Professional Bodies eg: Union etc. _____

15. Number of day's sick leave over 2 years. _____

16. Have you made any previous applications for employment with C M Downton. Yes/No
 If yes please give details: - _____

17. Give Full Name and Address of TWO REFEREES; one should be your previous employers or other persons of standing:

_____	_____
_____	_____
_____	_____
_____	_____

18. Details of experience to date. Please give particulars, in date order, of all appointments or jobs held including present appointment and service with H.M. Forces.

Date		Employer's Name and Address and Nature of Business	Job Title and Main Duties	Pay	Reason for Leaving
From	To				

19. Training: - Please give full details of training including apprenticeships and technical training and any qualifications obtained. _____

