



TEES COMPONENTS LTD.

MACHINISTS · FABRICATORS · ENGINEERS



NORTH SKELTON, SALTBURN- BY- THE- SEA, CLEVELAND TS12 2AP

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APPLICATION FOR EMPLOYMENT

PERSONAL

		Title	
Surname		Forenames	
Address		Telephone numbers Private: Business:	
		Date of Birth	
Postcode		Are you legally eligible for employment in the UK?	

Have you ever been convicted of a criminal offence, other than a spent conviction under the Rehabilitation of Offenders Act 1974? YES/ NO
If YES please give details

EMPLOYMENT

Position applied for:
Pay expected: £ per
Would you work full time? YES/NO. If part time, please state days/ hours
If offered this position, will you continue to work in any other capacity?
On what date would you be available for work?
Where appropriate to job role, do you have a current driving license?
Have you previously worked for us? YES/ NO. If YES, when?

EDUCATION

School	From	To	Courses/ Results										
College/University	From	To	Courses/ Results										
Further education & formal training	From	To	Courses/ Results										
Professional membership and qualifications													
Please outline the skills and experience you have gained through employment, either paid or voluntary, and other work activities and interests which you think will support your application.													
<p>Please give details of two people we could approach for personal references:</p> <table> <tbody> <tr> <td>Name</td> <td>Name</td> </tr> <tr> <td>Address</td> <td>Address</td> </tr> <tr> <td>Telephone</td> <td>Telephone</td> </tr> <tr> <td>Occupation</td> <td>Occupation</td> </tr> <tr> <td>Relationship</td> <td>Relationship</td> </tr> </tbody> </table>				Name	Name	Address	Address	Telephone	Telephone	Occupation	Occupation	Relationship	Relationship
Name	Name												
Address	Address												
Telephone	Telephone												
Occupation	Occupation												
Relationship	Relationship												

EMPLOYMENT HISTORY

Please complete starting with the most recent. Please use a separate sheet if required.

Name & Address of employer _____ _____ _____	Supervisor: Duties: _____ _____ _____ _____
Telephone _____	_____
Dates of employment: From _____ To _____	_____ _____ _____
Reason for leaving: Job Title:	_____ _____

Name & Address of employer _____ _____ _____	Supervisor: Duties: _____ _____ _____ _____
Telephone _____	_____
Dates of employment: From _____ To _____	_____ _____ _____
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Name & Address of employer _____ _____ _____	Supervisor: Duties: _____ _____ _____ _____
Telephone _____	_____
Dates of employment: From _____ To _____	_____ _____ _____
Reason for leaving: Job Title:	_____ _____

We may contact the above individuals for reference purposes.

If there is a particular employer(s) you do not wish us to contact, please indicate below:



The Disability Symbol

By using the disability symbol, we are showing our commitment to good practice in employing disabled people. We make a commitment to interview all disabled applicants who meet the minimum criteria for the vacancy and to consider them on their abilities.

Do you consider yourself to have a disability or health condition?
YES/ NO

Please let us know in the space below if you require any reasonable adjustments to attend an interview, or which you wish us to take into account when considering your application.

Our application form is available in alternative formats. Please contact Emma on 01287 650621, at sales@teescomponents.co.uk or fax no 01287 652642 to request this form electronically or in large print.