



# Application for Employment

*The details you supply below will not be used for any other reason than to assess your suitability for employment opportunities at The Milky Way.*

*If you're applying for a specific job all copies of this form in both digital and hard copy will be deleted within 3 months of the successful candidate accepting the position.*

*If you're sending this application form for us to hold on file in case a suitable job opportunity arises, we will print or retain one hard copy and delete any digital copies of this form. The hard copy of this form will be kept in a secure, locked cabinet for a maximum of 16 months. You can request that we destroy the hard copy at any point by emailing [info@themilkyway.co.uk](mailto:info@themilkyway.co.uk).*

*We take your privacy very seriously - for more details on how we handle personal data please see our privacy policy at [www.themilkyway.co.uk/privacy](http://www.themilkyway.co.uk/privacy)*

Date of application:

Title Mr/Mrs/Ms/Miss:

Surname:

Forenames:

Home tel number:

Mobile tel number:

Email address:

Address:

Date of birth:

Do you hold a clean current driving licence?

How much notice does your present employer require you to give?

Have you ever been convicted of a criminal offence which is not a spent conviction under the Rehabilitation of Offenders Legislation? If yes, please give details:

Please state the position you are applying for or the type of work you are looking for.

Do you suffer from any long term illness or disability which may require you to have assistance in the workplace? If yes, please give details:

Please indicate clearly when you are available for work: e.g. weekends, half terms / school holidays, full-time and to and from dates.

Please use the space below to state your reasons for applying for this position and why you think you would be suited to working at The Milky Way / with the public:

## EDUCATION

Schools attended from age 11 onwards:

School / College name:

Year from                            to

School / College name:

Year from                            to

Please list examinations passed giving dates, subjects and levels, if any:

Further and higher education colleges attended, if any:

School / College name:

Year from                            to

School / College name:

Year from                            to

Please list examinations passed giving dates, subjects and levels, if any:

Please list professional qualifications, giving titles and dates, if any:

Please list any appropriate training courses attended, giving titles and dates, if any:

## **PREVIOUS EMPLOYMENT**

Please start with your current / most recent position

Company Name:

Job title:

Date from \_\_\_\_\_ to \_\_\_\_\_

Brief outline of duties:

Company Name:

Job title:

Date from \_\_\_\_\_ to \_\_\_\_\_

Brief outline of duties:

Company Name:

Job title:

Date from \_\_\_\_\_ to \_\_\_\_\_

Brief outline of duties:

## **REFERENCES**

Please give names and addresses of two referees. At least one should be from your present or last employer, where appropriate. We will not contact your current employer without asking you first.

Name:

How you know them:

Relationship to you (if any):

Email address / address:

Tel number:

Name:

How you know them:

Relationship to you (if any):

Email address / address:

Tel number:

## **DECLARATION**

**I declare that all the information I have given on this form is correct to the best of my belief and knowledge and I give permission to the The Milky Way to take up any references it considers to be necessary and to arrange for a medical examination should this be desired. I understand if, after appointment, any information given is found to be inaccurate this may lead to dismissal without notice. I understand that I may be required to apply for a DBS (Disclosure and Barring Service) check.**

Any persons not happy to undertake a Disclosure and Barring Service check need not apply.

**Signed:**

**Date:**

*If you are planning to email this form, typing your name above will be taken as a signature.*

**Please return completed form by email or post to -**

**[info@themilkyway.co.uk](mailto:info@themilkyway.co.uk)**

**The Milky Way  
Clovelly  
Bideford  
Devon  
EX39 5RY**