

Gwynedd Transport Ltd
Application for Employment

Return Address: Gwynedd Transport Ltd, London Road, Holyhead, LL65 2PB.
Telephone: 01407 762 225 Fax: 01407 761 689

In Confidence

Application for employment as:.....		Application Date:		
Surname:.....		Other Names.....		
Address:				
Home Telephone No:		Mobile Telephone No:		
Date of Birth:		National Insurance No:		
Marital Status:	Single: Yes / No	Married: Yes / No	Separated: Yes / No Divorced: Yes / No	
Number of Dependants if Applicable:		Their Ages:		
Driving Licence No:		Expiry Date:		
Categories Covered:				
Endorsements:	Offence Code	Penalty Points	Offence Date	Expiry Date
Have You Had Your Licence Revoked:		YES	NO	Period of Ban Enforced:
Are You ADR Qualified		YES	NO	Expiry Date:
Details of any other training received or qualifications obtained which you feel may be appropriate to this application				

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<u>Health</u>									
Approx Height:					Approximate Weight				
State of general health:									
Have you received treatment for any of the following	Diabetes	Yes	No	Epilepsy	Yes	No	Blackouts	Yes	No
Would you agree to a medical examination by a qualified medical practitioner?								Yes	No
Do you have an eyesight disorder?	Yes	No	If yes please give details:						
Do you wear glasses	Yes	No	Date of last eye test:						
Do you suffer from any disability / illness that could affect you in employment?								Yes	No
<u>If Yes</u> please give details:									
Are you a registered disabled person?			Yes	No	<u>If Yes</u> please state registration number:				
<u>Employment History</u> Details of employment over the last <u>five years</u> , most recent or current first:									
Dates	Name & Address of Employer	Job Title	Average Weekly Earnings	Reason For Leaving					

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<u>Convictions.</u> Details of any convictions (other than driving), if none please state <u>None.</u>	
<u>Interests outside employment, memberships etc.</u>	
Interests / sports or hobbies:	
Please give information on any memberships you hold that may be appropriate to this application. (e.g. trade unions, professional institutes etc)	
<u>References.</u>	Please give the names and addresses of two referees, preferably including at least one previous employer whom we can approach now for references. No approach will be made to your present employer before an offer of employment is made.
<u>Referee 1</u>	<u>Referee 2</u>
<p><u>Declaration</u> <u>I understand and agree that:</u></p> <p>a) I will not be considered for employment as a driver without production of the appropriate, valid driving licence</p> <p>b) An offer of employment will be conditional upon receipt of satisfactory references.</p> <p style="text-align: center;">I CERTIFY THAT THE INFORMATION GIVEN ON THIS APPLICATION IS CORRECT AND ANY FALSE STATEMENT MADE HEREIN COULD RENDER ME LIABLE TO SUMMERY DISMISSAL.</p> <p><u>Signature:</u> <u>Date:</u>.....</p>	