Stony Dry Cleaners

<u>APPLICATION FORM</u>
PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

Stony Dry Cleaners

PERSONAL DETAILS											
			DATE OF BIRTH:								
(MR/MRS/N FORENAM	<i>,</i>										
FURENAM	ES.										
ADDRESS:											
TELEPHONE No: (IF SEEKING PART TIME EMPLOYMENT) DAYS OR HOURS YOU ARE ABLE TO WORK WHERE DID YOU HEAR OF THIS VACANCY											
GENERAL DETAILS											
DO YOU HAVE ANY PART TIME JOBS?											
IF SO, PLEASE GIVE DETAILS WHAT PERIOD OF NOTICE ARE YOU REQUIRED TO GIVE YOUR PRESENT EMPLOYER?											
	A CAR OWNER? YES/NO				N DRIVING LICENCE?	YES/NO					
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE? IF YES, PLEASE GIVE DETAILS:											
			& TRAININ								
DATE	NAME & ADDRESS O	F SCHOOL	-	EXAM	IINATION / TEST RES	SULTS					
				,							
	Please start with your present or n		NT HISTOR position and		ward giving full details						
			DUTI								
DATES	NAME & ADDRESS OF EMPLOYERS	JOB TITLE	RESPONSIE	BILITIES IN	REASONS FOR LEAVING	WAGE OR SALARY					
			BRI	EF							
L		L									

PLEASE GIVE ANY OTHER INFORMATION WHICH YOU THINK IS IMPORTANT OR HELPFUL TO SUPPORT YOUR APPLICATION									
GENERAL INTERESTS - HOBBIES, SPORTS OR OTHER INTERESTS									
REFERENCES EMPLOYER 1 (MOST RECENT): EMPLOYER 2 OTHER (PERSONAL OR CHARACTER)									
	(T (MOOT RECENT).			OTHER (FE					

PLEASE ENSURE THAT YOU HAVE COMPLETED ALL ASPECTS OF THIS APPLICATION.

I declare that all the above information is complete and correct, I understand that deliberate omissions or false information may lead to the termination of any employment undertaken. My previous employers may be approached for references should I be appointed to a position within Stony Dry Cleaners and I recognise that any offer of employment is subject to the receipt of satisfactory references. I confirm that I have completed this form personally.

SIGNATURE

DATE