



12 Sheep Street, Stratford-upon-Avon, Warwickshire CV37 6EF

STAFF APPLICATION FORM

Name:	
Address:	
Postcode:	
Telephone:	
E-mail address:	
National Insurance Number:	
Nationality: <small>*We need to know if you require a Worker Registration Certificate or Work Permit</small>	
Date of Birth: <small>*Minimum age for applicants is 16 years old</small>	
Position Applied For:	
Full- or Part-Time: <small>*Full-time is based on approx. 40 hours per week</small>	
Holidays Planned: <small>*Please give dates of any holidays planned or booked</small>	
Current/Last Employer & Job Title:	
Please give reasons for leaving:	
Previous Work History or Experience: <small>*Please give dates and a brief description of job title & duties</small>	

<p>Qualifications: *Please include any industry related qualifications e.g. Basic Food Hygiene, First Aid, etc.</p>	
<p>Interests & Hobbies:</p>	
<p>Briefly outline what you consider to be your best qualities & explain why we should consider you for the position for which you have applied:</p>	
<p>When would you be able to start working for us?:</p>	
<p>Do you have any convictions which prevent you from working in Licensed Premises?:</p>	
<p>Please give the name & address of 2 referees, one of whom should be personal, the other professional:</p>	
<p>Signed:</p>	
<p>Date:</p>	