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# **APPLICATION FOR EMPLOYMENT**

Reference No: **PERSONAL** Surname:\_\_\_ Forenames: \_\_\_\_\_ Address: Telephone numbers: \_\_\_\_\_ \_\_\_\_\_ Nationality: \_\_\_\_\_ Private Business Do you own a home? Rent? Live with relatives? Do you have a current driving license? Is it clean? Do you own a car? If NO, give details: National Insurance Number: Height: Weight: Work Permit Required: Work Permit Obtained: Misdemeanour record? (If YES, give brief description)

NICHOLL FUEL OILS LTD. 176 Clooney Road, Greysteel, Eglinton,

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Londonderry. Telephone No. 02871810471

EMPLOYMENT	
Position applied for:	
Expected Pay Per Annum:	
Would you work: Full-time?	Part-time?
If part-time, state days/hours:	
Have you previously worked for us?	
If YES, when?	
Have you any relatives working for us	?.
If YES, please give names and relation	onship:
Have you any skills, experience or qu for?	alifications especially suited to the job you are applying
On what date would you be available	for work?
EDUCATION	
Secondary School:	
From:	То:



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Examinations/Results:			
Secondary School (if needed):			
From:	То:		
Examinations/Results:			
College/University:			
	From	To	
	From	To	
	From	To	



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Further Education/ Formal Training:

### **EMPLOYMENT HISTORY**

**Details of previous employment, starting with MOST RECENT** 

PRESENT/LAST EMPLO	OYER:		
Address:			
Type of Business:			
Type of Work and Response	onsibilities:		
From	To		
		Leaving Pay	(Per Annum)
Reason for Leaving			
EMPLOYER:			
Address:			

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Type of Business:		
Type of Work and Responsibil	ities:	
From	То	
	Leaving Pay	(Per Annum)
EMPLOYER:		
Type of Work and Responsibil	ities:	
From	То	
Starting Pay	Leaving Pay	(Per Annum)
Reason for Leaving		
EMPLOYER:		



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Address:			
Type of Business:			
Type of Work and Responsibil	lities:		
From	То		
Starting Pay	Leaving F	Pay	(Per Annum)
Reason for Leaving			
PERSONAL REFERENCES			
Please give details of two peo obtaining your permission.	ple (not relatives) we	e could approach for r	eferences, after
Name:		Name:	
Address:		Address:	
Tel No:		Tel No:	
Occupation:		Occupation:	

### **DECLARATION**

A CANDIDATE FOUND TO HAVE GIVEN FALSE INFORMATION OR TO HAVE WILFULLY SUPPRESSED ANY MATERIAL FACT WILL BE LIABLE TO DISQUALIFICATION, OR IF APPOINTED, TO DISMISSAL. THE FACTS SET FORTH IN THIS APPLICATION FOR



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EMPLOYMENT ARE, TO THE BEST OF MY KNOWLEDGE, TRUE AND COMPLETE.	1
GIVE PERMISSION FOR THIS APPLICATION TO BE HELD ON RECORD AND	
UNDERSTAND THAT I MAY REQUEST ACCESS TO IT IF NECESSARY.	

Signature of Applicant:

Date:

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# FAIR EMPLOYMENT MONITORING FORM

### THIS ORGANISATION IS AN EQUAL OPPORTUNITY EMPLOYER

To help this organisation monitor the fairness of its employment practices if you would indicate below your community background:	, it would be helpful	
I am a member of the Protestant Community		
I am a member of the Roman Catholic Community		
I am a member of neither the Protestant nor Roman Catholic Community		
Please indicate whether you are: FEMALE MALE		
If you do not complete this questionnaire, we are encouraged to use the "residuary" method, which means that we can make a determination on the basis of personal information on file I application form.		
Ref:		
Date of Birth:		