

# lakeland

---

## APPLICATION FOR EMPLOYMENT

---

If readily available  
please attach a  
recent photograph  
in this space

NAME \_\_\_\_\_

POSITION APPLIED FOR \_\_\_\_\_

DATE APPLICATION FORM ISSUED \_\_\_\_\_

HOW DID YOU LEARN OF THE VACANCY \_\_\_\_\_

All the information on this application form will be treated confidentially.  
Where an offer of employment is made it will be subject to satisfactory references.  
Please return the completed application form to the relevant branch of Lakeland,  
or Head Office address below



INVESTOR IN PEOPLE

**Lakeland, Rothay Road, Ambleside, Cumbria LA22 0HQ**  
**Telephone: 015394 39000**

**CONFIDENTIAL**

# Personal Details

Surname (Mr/Miss/Ms/Mrs) \_\_\_\_\_

Forenames \_\_\_\_\_ Maiden Name \_\_\_\_\_

Permanent Address \_\_\_\_\_

Tel No. Day \_\_\_\_\_ Evening \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Nationality \_\_\_\_\_

Marital Status (please indicate) Single/Married/Separated/Divorced \_\_\_\_\_

Occupation of Spouse \_\_\_\_\_ Number of Children \_\_\_\_\_

Children at School or below school age:

Name(s) \_\_\_\_\_ Age(s) \_\_\_\_\_ Name(s) \_\_\_\_\_ Age(s) \_\_\_\_\_

\_\_\_\_\_

# General Details

1 Do you hold a current, Full Driving Licence? Yes/No Is it clean? Yes/No

If NO, please give details \_\_\_\_\_

2 Have you ever been convicted or had judgement against you for any offence in a Court of Law? Yes/No

If YES, give details \_\_\_\_\_

\_\_\_\_\_

# Education since the age of 11

1 Dates From To School, College, Polytechnic or University (Name and Address)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2 Examination details - Give details of any academic achievements including grade and subject

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3 Which subjects did you most enjoy at school? \_\_\_\_\_

\_\_\_\_\_

# Employment History

Give details of present and previous employment - start with your current or most recent job and work backwards in time. Homemakers - it may be that you have been at home or bringing up a family, please enter these dates.

Dates From:	To:	Company Name and Address	Type of Business	Job title	Reason for leaving	Salary

Short courses attended or in-Company training (i.e. Management Training, etc)

Subject/Activity	Year	Duration	Organising Body

## Health

1 How many days have you had off work, due to illness in the past 2 years? \_\_\_\_\_

2 List any major illnesses or accidents you have had in the past 5 years \_\_\_\_\_

---



---



---

3 Are you currently undergoing any course of medical treatment? Yes/No  
If YES, please give details

---



---



---

4 Have you ever suffered from any of the following, if yes, please give details.

Heart Disease	Yes/No	Back Trouble	Yes/No
High Blood Pressure	Yes/No	Nervous Disorder	Yes/No
Chest Problems	Yes/No	Migraine/Bad Headaches	Yes/No
Allergies	Yes/No	Epilepsy	Yes/No

# Interests/Sports/Hobbies

1 Please state any interests including hobbies. Please indicate those you do regularly

---

---

---

2 Do you have any commitments which may limit your working hours e.g. Saturdays or Sundays working, late evenings etc.  
If YES please give details

YES/NO

---

---

---

Any other information you may wish to give us

---

---

---

---

---

Date available to commence employment, should a position be offered \_\_\_\_\_

## References

Please give the names, addresses and occupations of two references - a previous employer and any other person of your choice

### Reference (A)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

---

---

### (B)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

---

---

N.B We may wish to contact your current employer, but will not do so without your consent.

Declaration - to the best of my knowledge and belief the information I have given on this form is correct and I understand that any appointment offered would be on this basis.

Signature \_\_\_\_\_

Date \_\_\_\_\_