

Pritex Ltd Station Mills Wellington Somerset TA21 8NN

Tel: 01823 664271

## **APPLICATION FOR EMPLOYMENT**

Position Applied For				
Personal Details				
Forenames	Surname	Title		
Address		Home Telephone		
		Mobile		
Post Code		E-Mail		
Current/Most Recent				
Employer (Name & Addres	ss)			
Position Held, Main Duties	s & Responsibilities			
Reason for Leaving or Wa	Notice Period			
Date Appointed	Date of Leaving if applicable	Current Pay		

**Previous Employment** (Please list all employment for the last 10 years listing most recent first. Please explain any gaps and continue on a separate sheet if necessary). Employer's Name/Address Position Held/Main Duties From То Reason for Pay Leaving **Education** (General, further and higher from age 11) Proof of qualifications may be required at interview or upon appointment Examinations Taken Passed & Grade Any craft or other training (proof of craft or other training maybe required at interview or upon appointment) Course/Certificate Title or Summary of Content

Reasons for Applying (Please continue on a separate sheet if necessary)					
Please tell us why you have applied for this position					
Please give examples of things you	have done	that make you suited	to this position		
<b>Supplementary Information</b>					
Other Employment					
If you are successful in this	Yes/No	If no, please specify			
application for employment would					
this be your only job?					
Shift Working	Days		Nights 1		
(PRODUCTION ONLY)	(7:30 - 16)	:30)	16:30 - 02:30)		
Please tick to indicate which					
shifts you would be happy to	Double Da		Nights 2		
work - you may tick more than	(6:00-14:0		(20:00 -06:00)		
one	14:00-22:0	00)			

## Reference

References will be requested for successful candidates from your current and last employer. Please list their contact details below. If however, you do not have any previous employment or the employer is no longer contactable, please supply 2 referees with similar standing who can comment on your work. Please note we will not contact your current employer without your permission and offer of employment maybe withdrawn if references are not acceptable to Pritex.

Name	Name			
Position	Position			
Organisation	Organ	isation		
Address	Address			
Contact Number	Contact Number			
E-Mail Address	E-Mail Address			
What is your connection with this referee?	What is your connection with this referee?			
Did you write this application yourself?		YES NO		
If no, please explain why				
Are you aware that Manual Handling is an essential task in all our Production, Despatch and Material Store Roles ?		YES NO		
<b>Declaration</b> I certify that to the best of my knowledge the statements in this application are accurate. I understand tha should my application be successful and it is discovered subsequently that any information is false it may lead to termination.				
Signature:				
Date:				

Please return your Application Form and the additional Supplementary Information Form to the Pritex Personnel Department



Ref No:		

## **Application Supplementary Information**

This form is separated before short listing and therefore will have no connection to your application. The information provided will be treated as confidential and will only be used if successful and for the monitoring of our fair treatment policy.

Hour did you boom		na (2 (Dispes date	~			
How did you hear about this vacancy? (Please state)						
Have you ever wo	ork for any comp	pany within the St	einhoff Group (inc	Relyon & Pritex) be	efore?	
Yes	No	No If yes, please state which company & when				
Please give your National Insurance (NI) Number:						
What is your Gender? (Please Circle)		de)	Male		Female	
What is your ethn	ic origin? (Pleas	se Cirde)				
,	White	Mixed	Asian	Black	Chinese	Other
What is your Cour	ntry of Birth (Ple	ease State):				
What is your Natio	onality (Please S	State):				
Please State your	Date of Birth:					
What is your age	group? (Please	Cirde)				
	16-18	19-30	31-40	41-50	51-65	65+
If invited for interview would you need any particular adjustments made? (Please Circle)						
		Yes	No			
If you have circled, 'Yes' you will be asked when invited for interview what adjustments you require.						
Have you ever been convicted of any criminal offences, (other than motoring offences) which are not yet						
spent under the Rehabilitation of Offenders Act 1974? (Please circle)						
			Yes	No		
If yes, please provide details (offence, date, sentence etc):						
The wearing of safety footwear, on the factory floor, is mandatory – do you have any problems that would prevent the wearing of safety footwear?  Yes/No						
Shoe Size	Shoe Fitting Standard/Wide			ndard/Wide		