

PMH SUPPLIES

**Suppliers of Fixings, Power Tools and Diamond
Products to the Construction Industry**

APPLICATION FOR EMPLOYMENT

Application No: _____

Position Applied For: _____

Name: _____

Closing Date: _____

OFFICE USE Only

Applicant No..... Verification of sick leave ☐

Int Time..... References received & checked ☐

Int Date.....

PMH SUPPLIES

Suppliers of Fixings, Power Tools and Diamond Products to the Construction Industry

Please fill in the Questionnaire below:

P M H Supplies is an Equal Opportunities Employer. We want to show that we are committed to equality of opportunity and fair treatment. To do so we need to monitor the community and ethnic backgrounds of our employees and job applicants; so we are asking you to help us indicating your community and ethnic background below.

This information will not be used for any other purpose other than this monitoring.

Please indicate your community background by ticking the appropriate box:

PROTESTANT ☐ ROMAN CATHOLIC ☐ NEITHER ☐

Please indicate your community background by ticking the appropriate box:

BANGLADESHI ☐ BLACK AFRICAN ☐ CHINESE ☐

BLACK CARIBBEAN ☐ INDIAN ☐ PAKISTAN ☐

IRISH TRAVELLER ☐ MIXED ETHNIC GROUP ☐

WHITE ☐ OTHER ☐

Thank you for your co operation

Please complete in BLOCK CAPITALS. Complete each section carefully before returning.

1. YOUR PERSONAL DETAILS:

Mr/Mrs/Miss/Ms/Other (Specify): _____

Tel No Home: _____

Surname: _____

Other Contact No: _____

Any former Surname: _____

Date of Birth: _____

Forenames: _____

National Insurance No: _____

Present Address: _____

Citizen of EC Country YES/NO

Non EC (Please State) _____

Post Code: _____

Smoker YES/NO

Do you hold a current full clean driving licence? YES/NO If No please give details of offence and number of points.

Have you ever been convicted of a criminal offence which cannot be considered spent under the Rehabilitation of Offenders (NI) Order 1978. YES/NO

If Yes, Please give details:

Convictions do not necessarily debar an applicant from gaining employment.

Failure to disclose convictions could result in dismissal or disciplinary action.

Signed.....

2. **EDUCATION:**(From Secondary School)

Awarding Body	Subject	Level	Grade	Year

Please continue on a separate page if necessary:-

UNIVERSITY DEGREE(S), DIPLOMA(S), TECHNICAL QUALIFICATIONS (OR EQUIVALENT)

Qualification	University/College	Dates	Examination(s) yet to be taken with dates

PROFESSIONAL QUALIFICATIONS, TRAINING and PROFESSIONAL TRAINING

Name of Professional Body	Examination(s) Taken	Examination(s) Yet to be taken

3. EMPLOYMENT HISTORY:

Please list across columns 1-5 your previous posts beginning with the most recent.

Dates	Name and Address of Employer	Title of Post & Brief Description of Duties	Reason for Leaving	Salary at date of Leaving

4.HEALTH/ATTENDANCE RECORD:

Do you suffer from any recurring mental or physical illness which has lasted for over 12 months?
YES/NO

If Yes, Please give details: _____

Number of Dates absent on sick leave in the past 2 years _____

Number of sick leave episodes in the past 2 years _____

This information may be subject to verification with your employer

5. OTHER INFORMATION:

Please give details of any information, which you think, may have a direct bearing on your application e.g. skills, achievements or spare time activities.

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6. PRESENT EMPLOYMENT DETAILS:

Present or most recent Employer: _____

Name and Address: _____

Title of Post:_____

Location:_____

Date appointed to this post:_____

Present Salary: _____

Period of notice required by present employer:_____

Continued:

Reason for Leaving: _____

Include a *brief* description of current duties and responsibilities held in the business:

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7. REFEREES:

Please name two referees one of whom should be your present or most recent employer. School leavers must include their class teacher/tutor. Relatives should not be named as referees.

Name/Position _____

Name/Position _____

Address _____

Address _____

Tel No. _____

Tel No: _____

***I declare that all the information I have given is true to the best of my
acknowledge that inaccurate false information given may result in an offer of
employment being withdrawn or may render me liable for dismissal.***

Signature:

Date:/...../.....