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PERSONAL DETAILS

Surname:	First
Surfame.	
	name(s):
Known as:	Mr / Mrs /
	Miss/ Ms
	,
Address:	
Postcode:	Tel. No.
	Home:
Tel. No. Work:	Mobile tel.
	No:
Email address:	
Best time to contact you: (am /pm/ evening - please state time)	
VACANCY DETAILS	
Position applied for:	

Part time

State who:

State when:

Shifts

LICENICES

Prepared to work:

Have you any relatives working for us?

Have you previously worked for us?

Full time

Period of leaving notice required by present employer:

LICENCES		
Do you own your own car?	YES/NO	Have your own YES/NO transport?
Do you have a current driving licence	e? YES/NO	Provisional/Full
Do you hold a current HGV licence?	YES/NO	Specify level:
Are you qualified to drive: Fork Lift Truck: YES/NO	Reach Truck: YE	S/NO Counter balance truck: YES/NO

LANGUAGES

Can you speak or read more than one language relevant to your application? YES/NO Give details:

YES/NO

YES/NO



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EDUCATION/QUALIFICATIONS

Schools/Colleges atter	nded	From 1	0	Qualifications attained
PROFESSIONAL MEMBERS	SHIPS			
Detail membership of any professional organisations:				
EMPLOYMENT DETAILS				
Present/last employer	From	Job title & final	Reason for	Duties
name & address	То	salary	leaving	

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Previous employer name & address	From To	Job title & final salary	Reason for leaving	Duties
		,		
			(Please continu	ue on a separate sheet of paper if necessary)

REFERENCES

Please give details of two referees you have worke employer.	ed for, one of which must be your current/most recent
Name of Organisation	Name of Organisation
Name of Referee	Name of Referee
Job Title	Job Title
Address	Address
Postcode	Postcode
Telephone no.	Telephone no.
E-mail	E-mail
Can we contact prior to interview? YES/NO	Can we contact prior to interview? YES/NO

DECLARATION

DECLARATION			
The facts declared in this application for employment are, to the best of my knowledge, true.			
Signature:	Date:		



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This page of our application form is to be completed and returned by the applicant to the recruiting manager in strictest confidence, along with supporting documentation. It is not permissible for any of the information on this sheet to be transferred to another form of record or used by any department.

FIRST NAMES:

DATE OF BIRTH: (DD/MM/YY)

PERSONAL DETAILS

MR / MRS / MISS / MS:

SURNAME:

DISABILITIES				
Do you have any disabilities of which we should be aware with a view t	o providing you with			
assistance/workplace adjustment in the event of joining the Company?	If yes, please detail: YES / NO			
μ. γ.	,, ,			
Are you registered disabled: YES / NO				
If yes, registered number				
ii yes, registered namber				
CRIMINAL CONVICTIONS				
Have you ever been convicted of a criminal offence?	YES / NO			
Thave you ever been convicted of a driminal offence.	1237110			
(Declaration subject to the Rehabilitation of Offenders Act):				
(Bediardion subject to the Nemabilitation of Officialis Net).				
RIGHT TO WORK				
Do you require a work permit? YES / NO				
bo you require a work permit: YES/NO				
Are you entitled to work in the UK? YES / NO				
Are you entitled to work in the ok: TES/NO				
Are you entitled to work in the UK? YES / NO. If attending interview p	loose bring with you an original of			
,				
one of the following: NI Card AND P45, a British birth certificate, UK passport, European Economic Area				
passport or other relevant document, to allow a photocopy to be taken				
FOR OFFICE USE ONLY				
The following document was checked and copied for file.				
·				
Signed:				
Job Title:				