

**ESTATE SERVICES (NI) LTD
APPLICATION FORM**

*Please
Attach A
Passport
Photograph
Here*

POST: Door Supervisor

DATE:

Please complete all sections of this application form using BLACK INK or TYPESCRIPT

1. PERSONAL PARTICULARS

Name: _____

Address: _____

Postcode: _____

Telephone number for contact: _____

National Insurance No: _____

D.O.B _____

Weight Approx: _____

Height Approx: _____

2. EDUCATION

'O' Level/GCSE or equivalent.

Number of subjects passed: _____

Subjects passed with dates: _____

'A' Level or equivalent.

Number of subjects passed: _____

Subjects passed with dates _____

2. BANK DETAILS FOR ELECTRONIC BANKING SYSTEM

Name on Acc: _____

Name of Bank: _____

Account No: _____

Sort Code: _____

3. PROFESSIONAL QUALIFICATIONS

Name of professional body or bodies. State examination date/s and result/s or if by election.

4. PRESENT OR LAST EMPLOYER

Employer's Name: _____

Address: _____

Post held: _____

Duties of post: _____

Date Appointed _____ Present Salary _____ Period of Notice _____

5. VOLUNTARY SERVICE OR COMMUNITY WORK

Please give details of any voluntary service or community work that you have undertaken in an unpaid voluntary capacity.

6. WORK EXPERIENCE

Please list, starting with the latest, any previous positions you have held, with a brief description of duties and dates. Use a continuation sheet if necessary.

7. EXPERIENCE RELEVANT TO THIS POST

Using the Job Description and Personnel Specification, please say how your skills, abilities and experience relate to or are relevant to this post Use a continuation sheet if necessary.

8. MEDICAL HISTORY

9. REFERENCES

Please name two referees, who should have knowledge of you in a job related capacity.

1. Name: _____

Address: _____

Postcode: _____

Telephone: _____

Position: _____

2. Name: _____

Address: _____

Postcode: _____

Telephone: _____

Position: _____

These referees may be approached if you are short listed for interview, unless you specify otherwise.

REHABILITATION OF OFFENDERS ACT 1974

Have you any convictions that are not spent under Rehabilitation of Offenders Act?

If yes please provide further details:

CRIMINAL RECORD CHECK (please note that for certain roles our clients require our employees to have undergone a satisfactory CR check)

Please indicate below your agreement, or otherwise, to us undertaking a CR check on you.

I*agree/do not agree to you undertaking a CR check on me. (Delete as appropriate).

Signature----- Date-----

10. DECLARATION

I declare that the information set forth in this application form is, to the best of my knowledge, true and complete.

Signature: _____

Date: _____

Please return to:

*Manager
Estate Services (NI) Ltd
(Door Supervisor Post)
Unit 1
Iona Business Park
Southway
Derry BT48 9LH*