

EMPLOYMENT APPLICATION FORM

PRIVATE AND CONFIDENTIAL



What Position are you applying for?

Manager/Games
Master

Crew Member/
Party Host

Other _____

Your Personal Details

Forename/s _____ Surname _____

Address _____

Postcode _____

Tel No. (home) _____ Tel No. (mobile) _____

Email address _____ National Insurance No. _____

Are you of school leaving age? YES ☐ NO ☐ Marital Status _____

How far do you live from Battle Sector X? _____

How would you get to and from work? _____

How did you hear about the job? _____

Your Next of Kin (Emergency Contact)

Name _____ Relationship _____

Address _____ Telephone No. (home) _____

Telephone No. (mobile) _____

Post Code _____

Your Availability Please indicate the times when you are available to work

Shifts	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Anytime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mornings 9 – 2pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoons 12 – 6pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evenings 4 – 10pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Hrs 9 – 3pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Please State _____							

How many hours would you wish to
work each week? _____

Could you work extra
hours if required? YES ☐ NO ☐

Are you looking
for Part-time? ☐ Or Full-time
employment? ☐

If temporary, when
are you available? From _____ To _____

Please indicate when you
would be available to start
work. _____

Please specify any dates,
when you would NOT be
available for interview _____

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Your Present and Previous Employment (Please include work experience details)

Dates Employed From & To	Company Name, Contact Name, Contact Email Address, Full Address of Company and Company Contact Tel. no.	Job title	Reason for leaving

If there any contact(s) you'd rather we do not contact for a reference? Please indicate with a star.

Do you have another job? YES ☐ NO ☐

If you have no previous employment, please give details of who to contact for a personal or educational reference:

If offered a position with Battle Sector X, will you continue to work for your other employer? YES ☐ NO ☐

If YES, please give details of days and hours currently being worked?

Your Education and any relevant Training

School/College /University/Course Provider	Type of Course, Subjects and/or Courses Taken	Grade Achieved/Predicted Other Relevant Awards/Achievements
School:		
College:		
University:		
Course Provider:		

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About You and your interests

What do you like to do in your spare time? (include details of any interests or membership of clubs and societies)

What is your proudest accomplishment to date?

What do you think will make you a good candidate for this position and why?

What qualities make a good person to work with and why?

Criminal Convictions

Have you ever been convicted of a criminal offence? YES ☐ NO ☐

If "YES", please give details

(under the Rehabilitation of Offenders Act 1974, spent convictions need not be declared)

Your Health

Have you now or over the last seven days suffered from diarrhoea, vomiting or skin infection? YES ☐ NO ☐

Have you ever had or are you known to be a carrier of typhoid or paratyphoid and/or in the last 21 days have you been in contact with anyone suffering from either of those illnesses? YES ☐ NO ☐

If 'Yes' please give details.

(Use a separate sheet and attach to this form).

Declaration

The contents of the form are confidential. If you are successful it will form the basis of your records held by the Company.

I consent to the company recording my data and disclosing information contained on this form to third parties in order to assess this application, any subsequent employment and any matter relating to that employment. I also consent to the company contacting my present and/or previous employer or work experience provider for a reference. I understand that before any offer of employment is made, I must provide the company with confirmation of my eligibility to work in the UK.

I certify that the information on this form is, to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection or, if employed, dismissal.

Applicant's signature _____ Date _____

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OPTIONAL: Equal Opportunities and Diversity Development

Battle Sector X considers itself to be a Family friendly company and is committed to the equality of opportunity in employment.

Battle Sector X strives to take into account any Health related issues to ensure fair opportunity of employment, and will if offer made, make all reasonable adjustment to cater for them individuals. Battle Sector X will never reject an application because of the health of the individual. Battle Sector X may ask the individuals to attend an appointment with an occupational health professional to ensure the correct adjustments can be made for the applicant involved.

Battle Sector X also endeavours to ensure that an individual's sexuality will not affect any opportunities in their employment.

Battle Sector X is completely against any form of bullying with employment and will discipline any employees found to be bullying others within the establishment.

The company is committed to monitoring its Diversity Policy in respect of job applicants and employees in accordance with the Codes of Practice issued by the Commission for Racial Equality, the Equal Opportunities Commission and the Code of Practice relating to the Disability Discrimination Act. Employees will have access to their recorded data. Please answer the questions below, by ticking the appropriate boxes.

This information is used for monitoring purposes only and will be held securely throughout employment. Any information of unsuccessful applicants will be destroyed immediately.

Marital Status _____ Any Dependents? _____

Gender Male (M) Female (F) Sexuality _____

Ethnic Origin - I would describe my Origin as:

Black Origin Afro-Caribbean (A) ☐ African (B) ☐ Black Other (C) ☐

please specify _____

Asian Origin Indian Sub-Continent (D) ☐ Chinese (E) ☐ Asian Other (F) ☐

please specify _____

White Origin European (inc. UK) (G) ☐ White Other (H) ☐

please specify _____

Battle Sector X seeks to offer employment opportunities irrespective of physical or mental disabilities wherever possible, and will make any reasonable adjustments to ensure that disabled people can compete equally with non-disabled people.

Do you consider yourself to have a disability that is relevant to the job for which you are applying? YES ☐ NO ☐

If 'yes' please give brief details of the effects of the disability and any assistance you would need: a) to attend an interview

b) to enable you to perform the job, if successful
