



St Giles Hotel

LONDON

Bedford Avenue, London WC1B 3GH
Main Tel: 020 7300 3000 | Fax: 020 7300 3001
www.StGiles.com

APPLICATION FORM

Please complete this form legibly. All information given will be treated with the strictest confidence.
Continuation sheets may be added if necessary.

1. POSITION APPLIED FOR:

SALARY EXPECTED:

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HOW DID YOU HEAR OF THIS VACANCY?

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2. PERSONAL DETAILS:

Surname:	Telephone number (Home):
Forenames:	Telephone number (Mobile):
Address:	
Postcode:	E-Mail:

Do you have the right to work in the UK? Note: the company will require proof of this right before an offer of employment can be confirmed – eg. Work Permit, Passport	Yes	No
Do you have a clean, current driving licence?	Yes	No
Do you have any pre-booked holidays	Yes	No
Have you ever been convicted of a criminal offence (which is not spent under the Rehabilitation of Offenders Act 1974)?	Yes	No
Are you able to work varied shifts on any day of the week?	Yes	No

3. EDUCATION:

From	To	Type of School (i.e. Grammar/ Secondary)	Examinations taken and Qualifications Gained (Specify Grades)

4. EMPLOYMENT RECORD (Please list chronologically, starting with current or last employer):

Name and Address of Employer and Nature of Business:	From: To:	Job Title: Job Function/ Responsibilities:	Final Salary and Reason for Leaving

5. TRAINING / PROFESSIONAL BODIES:

Details of training courses attended and awards achieved, including dates, if appropriate and/or professional bodies to which you are a member.

6. NEXT OF KIN

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7. OTHER INFORMATION

Do you require any special arrangements to be made to assist you in your work or if called for interview?
Please provide details:

Do you know of any reason that could prevent you from being unable to attend work on occasions?
Please provide details:

8. REFEREES

Please give the details of two work related referees, including your current or most recent post. Referees will not be contacted without your prior approval.

Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Telephone No.:	Telephone No.:
Nature of Relationship:	Nature of Relationship:

9 VERIFICATION OF INFORMATION

I certify that all information which I have provided is correct. I certify that I completed this application form myself and I understand that any false information given may result in a job offer being withdrawn.

Signature:

Date:

Office Use Only

Permission to work in UK checked?

Passport?

Work permit?

Expiry date?

Student Visa?

Student Hours?

Date of interview?

Holidays booked?

If student;

Course?

Place of study?

Letter of timetable?

Special requirements?

Job offered?

Terms and conditions?

Review date?