



**Head Office Address:**  
Peter Ward Homes Limited, Annie Reed Road, Grovehill, Beverley  
East Yorkshire HU17 0LF  
t. 01482 861484  
rosemary.key@peterwardhomes.co.uk

## Application for Employment

Position applied for:

|  |                         |
|--|-------------------------|
| Surname (Mr/Mrs/Miss)  | First Name:             |
| Address:   | <b>Phone Numbers...</b> |
|  | Home Code:              |
|  | Number:                 |
|  | Mobile:                 |
|  | Other Code:             |
|  | Number:                 |
| Source of application (name of newspaper, internet, email etc) | Email Address:          |

### Section 1 – General Information:

|  |             |
|--|-------------|
| Place of Birth   | Nationality |
| Have you had any criminal conviction(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No                                    |             |
| When would you be able to take up an appointment with the company?   |             |
| Do you have a current full driving licence? <input type="checkbox"/> Yes <input type="checkbox"/> No                                 |             |
| Do you have have a forklift (telescopic) Licence? <input type="checkbox"/> Yes <input type="checkbox"/> No                           |             |
| Have you had any driving accidents or endorsements within the last 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No |             |

### Personal References (at least one employer)

|               |               |
|---------------|---------------|
| Name:         | Name:         |
| Occupation:   | Occupation:   |
| Address:      | Address:      |
|               |               |
|               |               |
| Relationship: | Relationship: |

Do we have your permission to approach one or both references prior to an offer of employment being made?  Yes  No





**Section 5 – Other Qualifications and Memberships of Professional Bodies**

| Academic, technical or professional qualifications (give dates and indicate subject and grade or class where necessary) | College, professional body etc, by whom granted |
|---|---|
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**Section 6 – Health**

Do you have any illness, injury, medical condition or disability that we should be aware of in order to make reasonable adjustments to assist you with our recruitment process? If so please provide details below.

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Do you have any illness, injury, medical condition or disability that may affect your ability to perform any of the essential functions of the role as outlined in the Job Description provided. If so, please provide details below.

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Are you currently on any medication or undergoing treatment of any kind that may impair your ability to perform any of the essential functions of the role as outlined in the Job Description provided. If so, please provide details below.

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Do you currently take any drugs that may impair your ability to perform any of the essential functions outlined in the Job Description provided? If so, please provide details below.

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**Section 7 – General Interests** (please attach additional sheets if you require more space)

Indicate, briefly, any particular interests or leisure activities you have. (Please attach additional sheets if you require more space.)

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**Section 8 – Additional Information**

Indicate here any experience/achievement you believe is relevant to the position applied for (please attach additional sheets if you require more space).

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**Declaration**

*The facts stated in my application for employment are to the best of my knowledge, true and complete.*

Signature ..... Date .....

|                      |                       |                     |
|----------------------|-----------------------|---------------------|
| For office use only: | Application Received: | Interview Date/Time |
|----------------------|-----------------------|---------------------|