

# Job Application Form



Position Applied For

Your title

Your surname

First name

Maiden name if applicable

Home Address

Postcode

Home number

Mobile

Daytime Contact Number

email

Date of Birth

Are you are an Isle of Man worker as defined in the Control of Employment Acts? Yes/No

If living in the Isle of Man, when did you take up residence? Month/Year

If married, does your partner hold a current work permit? Yes/No

Do you have any relatives working at Isle of Man Creamery? Yes / No Relationship

Do you hold a current valid driving licence? Yes/No

Do you hold a current valid HGV licence? Yes/No

Do you hold a current valid fork lift licence? Yes/No

## Health Status

Are you receiving any medical treatment at present or taking any medication? Yes/No

If the answer is Yes, please supply details on a separate sheet.

Please give details of sickness absence from work or education during the past two years.

Number of absences

Total number of days

**Part 2****Present or most recent employer**Your job title Salary & Benefits Employer's name and address Start Date Finish Date Postcode Amount of notice required Reason for leaving 

Please give brief details of your responsibilities

**Part 3****Previous Employment**Please give details of any jobs before the one you told us about in **Part 2**, starting with the most recent.**Job 1**Employers name and address Start Date Finish Date Postcode Job Title 

Main Duties

Reason for leaving **Job 2**Employers name and address Start Date Finish Date Postcode Job Title 

Main Duties

Reason for leaving

**Job 3**

Employers name and address

Postcode

Start Date

/ /

Finish Date

/ /

Job Title

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Main Duties

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Reason for leaving

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**Part 4****Education and Qualifications**

Please list examinations passed and qualifications gained (including professional qualifications) starting with the most recent.

**Establishment 1**

Name and address of the establishment where you passed the examination(s)

Postcode

Start Date

/ /

Finish Date

/ /

Examination(s) passed or qualifications gained and grades

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**Establishment 2**

Name and address of the establishment where you passed the examination(s)

Postcode

Start Date

/ /

Finish Date

/ /

Examination(s) passed or qualifications gained and grades

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**Establishment 3**

Name and address of the establishment where you passed the examination(s)

Postcode

Start Date

/ /

Finish Date

/ /

Examination(s) passed or qualifications gained and grades

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