



W. H. Kemp (Electrics) Ltd
Cory Way
West Wilts Trading Estate
Westbury
Wiltshire BA13 4QT
Tel: (01373) 823322 Email: info@whkemp.co.uk
www.whkemp.co.uk

Application for Employment

ABOUT YOU

Title:		Forenames:		Surname:	
Previous Surnames:					
Address:					
Postcode:					
Telephone:			Mobile:		
Email:					
National Insurance Number:					
Have you been convicted of a criminal offence (which is not spent under the Rehabilitation of Offenders Act 1974)? Yes ☐ No ☐ If yes please give details including dates:					
Position Applied for:			Expected pay:	£	per
Are you eligible to work and reside in the UK? Yes ☐ No ☐ If no please explain:					

ABOUT YOUR EDUCATION AND QUALIFICATIONS

Please start with the most recent

Dates Attended	Name of Establishment	Qualifications Gained	Date Qualification Awarded

Have you any additional skills or qualifications that you feel are relevant to the job you are applying for?

EMPLOYMENT HISTORY

Please list the last four organisations you have worked for starting with your present/last employer

Name and Full Address of Employer	Position Held and Main Duties	Leaving Salary	Reason for Leaving
Start Date:			
Finish Date:			
Start Date:			
Finish Date:			
Start Date:			
Finish Date:			
Start Date:			
Finish Date:			
May we contact any of the above employers for a reference? Yes ☐ No ☐ If no, which one/s do you not wish us to contact and why? 			

Please state why you applied to W.H. Kemp (Electrics) Ltd for a job:

YOUR HEALTH

To enable us to make any reasonable adjustments for you please let us know if you are a registered disabled person. Yes ☐ No ☐ If yes please give details:
Disability Registration Number

Have you ever had to give up any previous job for medical reasons? Yes ☐ No ☐ If yes please give details:

Have you been absent from work/education through sickness in the past 12 months? Yes ☐ No ☐ If yes how many days were you absent for?

Are you colour blind or colour deficient? Yes ☐ No ☐ Please note – this job involves being able to recognise colours on electrical cables, many of which may be used in safety critical environments such as hospitals, therefore a colour blindness test will be carried out at interview.

AVAILABILITY

When are you available to start work?	
Are there any dates on which you are not available for interview?	

AUTHORISATION AND DECLARATION

Did someone else complete this application form for you? Yes ☐ No ☐ Authorisation: I authorise the Company to obtain references to support this application once a formal job offer has been made and release the Company and referees from any liability caused by giving and receiving information. Under the Data Protection Act 1998 I authorise the Company to process the data given for recruitment and employment purposes. Declaration: I declare that the information I have supplied on this form is complete and correct. I understand that misrepresentation or omission of facts may result in the cancellation of any offer of employment, or in dismissal if already employed, and that offer of employment is dependant on the receipt of satisfactory references.			
Signature:		Date:	

INTERVIEWERS NOTES