

Employment Record: Please list all previous employment, starting with present/ most recent.
Please include any part-time licensed trade experience.

Date From/To	Employer	Job Title	Reason for Leaving

How will your general experience help you in this job?

Have you ever been previously employed at this outlet?
If 'YES' Please give details

YES/NO

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What days/hours are you willing to work?

Medical History:

Please give details of any operation, serious illness or complaints that may prejudice your working in a public house or food related environment. (eg: Typhoid)

Name and Addresses of two referees:

Can they be contacted at this stage?
(One must be your last employer)

YES/NO

Name	Address and Telephone Number	Occupation

Declaration: I affirm that the information given in this application is correct to the best of my knowledge and i understand that any deliberate mis-statement renders me liable to the disqualification or to dismissal if employed.

Signed

Date