EDWARDS OF CONWY LTD



Job Application Form

Job role applied for:
Full name:
Date of birth:
Address:
Postcode:
Daytime telephone number:
Email address:
Please provide dates & details of secondary education:
Please provide dates & details of further or higher education:
Please provide details of any other relevant training & qualifications:

If you are currently employed (either full or part time) please tell us about your role below:

Present employer:				
Address:				
Postcode:				
Job title:				
Duties:				
Rate of pay: Date employed: from: to:				
Reason for leaving:				
Please tell us why you applied for this job and why you think you are the best person for the job:				
If you have a disability, please tell us about any adjustments we can make to assist you at interview:				
interview:				
Please describe any health conditions that may affect your ability to carry out the role you have				
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Please answer the following questions:

Do you have a food hygiene certificate?	Yes	No	
Do you have access to a vehicle you could use for work?	Yes	No	
Do you hold a current full driving UK Driving license?	Yes	No	
Have you had any driving convictions in the last 5 years?	Yes	No	
Have you been convicted of a criminal offence which is not spent under the Rehabilitation of Offenders Act 1974?	Yes	No	
If yes, then please supply details:			
If successfully appointed, you must have permission to work in the UK by the start of your employment. If you are invited to attend an interview you will be required to produce original documents to prove you have the right to work in the UK. (Further details about the right to work in the UK are available on the Home Office Website.) Can you provide Right to Work Documents?	Yes	No	
Please provide the details of an employer who can provide you with a work-related	d referenc	ce:	
Employer:			
Name:			
Address:			
Telephone:			
Email address:			
 Please tick each box to confirm your agreement with the following statements: I declare that the information given on this application form is, to my knowledge, true. I understand that if it is subsequently discovered that any statement is false or misleading, my offer of employment may be withdrawn, or I may be dismissed from my employment by the company without notice. I understand that I may be asked to consent to medical examination if required for the role. I consent to my application form being kept on file for up to 5 months after the closing date to enable Edwards of Conwy Ltd and its sister company The Traditional Welsh Sausage 			
Company Ltd to consider me for future vacancies (opting not to tick this box will not had adverse effect on your application).			
Signature: Date:			

Please return your completed application to our Administration Office at:

Edwards of Conwy Ltd, 18 High Street, Conwy, County of Conwy, LL32 8DE sales@edwardsofconwy.co.uk

General Data Protection Act 2018

Edwards of Conwy Ltd is the 'Controller' of the personal data you provide to us. We collect basic personal data and special category data about you for legitimate reasons relating to your application of employment to Edwards of Conwy Ltd and our sister company The Traditional Welsh Sausage Company Ltd. More information about how we manage and process your personal and special category data can be found on our website: shop.edwardsofconwy.co.uk/privacy