

Webbs

Lifestyle • Gardening • Leisure

APPLICATION FOR EMPLOYMENT

PERSONAL DETAILS

Surname: _____ Forename (s): _____

Address: _____

_____ Post Code: _____

Home Tel. No: _____ Mobile No: _____

Email Address: _____

Please note that Webbs will contact you by email if an email address is provided.

APPLICATION DETAILS

Preferred Work Location: Webbs, Wychbold Webbs, West Hagley

Vacancy Applied For: _____

Salary Expectations £ _____ per _____

How did you hear about this vacancy? _____

When would you be available to commence employment? _____

Are you legally eligible for employment in the UK? Yes No

Do you require a work permit to work in the UK? Yes No

Please indicate your preferred working hours:

Full-time 4 days per week plus alternate weekends (6/4 rota) Part-time

Full-time Monday to Friday (usually restricted to Administration positions) Weekends Only

Please indicate which departments you would be interested in working in:

Administration <input type="checkbox"/>	Car Park <input type="checkbox"/>	Finance <input type="checkbox"/>	Food Hall <input type="checkbox"/>
Garden Plant <input type="checkbox"/>	Grounds <input type="checkbox"/>	Houseplants <input type="checkbox"/>	Kitchen <input type="checkbox"/>
Landscapes <input type="checkbox"/>	Leisure <input type="checkbox"/>	Marketing <input type="checkbox"/>	Pets / Aquatics <input type="checkbox"/>
Restaurant <input type="checkbox"/>	Tills <input type="checkbox"/>	Warehouse <input type="checkbox"/>	other (please state) <input type="checkbox"/>

Please state the hours you can work each day:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start Time							
Finish Time							

PRESENT POSITION

Please give details of your current employment:

Job Title		Employer/Organisation	
Start Date		Current Salary	
Notice Period Required		End Date (if applicable)	
Main Duties and Responsibilities			
Reason for Leaving			

OTHER PREVIOUS EMPLOYMENT

Please give details of any other employment you have had, starting with the most recent.

From	To	Name and Address of Employer	Position and Main Duties and Responsibilities	Salary	Reason for Leaving

FURTHER DETAILS

Do you require any special arrangements on medical grounds to enable you to attend an interview?

Yes No

If yes, please give details: _____

Do you hold a current driving licence?

Yes No

If yes, please state category (Full, Provisional, HGV): _____

Have you been convicted of any driving offences in the last 3 years?

Yes No

If yes, please give details: _____

Do you have any unspent criminal offences or are there any criminal proceedings pending against you?

Yes No

If yes, please give details: _____

(Declaration subject to the Rehabilitation of Offenders Act)

DECLARATION AND DATA PROTECTION

I confirm that the information given, is to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection or, if employed, dismissal. I agree that if I am successful in my application, Webbs may approach two referees, one of whom will be my last employer, (if applicable). I will provide full details of these upon request.

I hereby authorise Webbs to hold my application form and personal details on file. I agree that if I am unsuccessful in my application, my details will be retained for a period of 6 months.

Signed: _____ Date: _____

Please return your completed application form to Human Resources, Webbs, Wychbold, Droitwich Spa, Worcestershire WR9 0DG, or email a scanned copy to jobs@webbs.co.uk

Regrettably due to the volume of applications received we are unable to respond to all applicants individually. Shortlisted candidates will be contacted within four weeks of application. Thank you for your interest in working at Webbs.

For Human Resources Use Only: