



Hare Hatch Services Ltd (Hare Hatch Sheeplands)

Application for Employment

Please read this form carefully and answer all the applicable questions. Please sign and date the Declaration and Consent at the end of the form as required by the Data Protection Act.

Return the completed form to: Gill Saxon, HR Manager, Hare Hatch Sheeplands,
London Road, Twyford, Reading, Berkshire. RG10 9HW
Tel: 0118 9401600 Fax: 0118 9401006
Email: gill@harehatchnursery.co.uk www.harehatchsheeplands.co.uk

Department of Interest: Farm Shop Coffee Shop Plant Centre Other

Vacancy Applied For:

How did you hear about us/vacancy?

Applicant's details

• Full name: Mr / Mrs / Ms / Dr / other:

• Home address:

..... Postcode:

• Home telephone number: Email:.....

• Mobile telephone number:

• Date of Birth: National Insurance Number:
[voluntary information]

• If you are not a British passport holder, or a European citizen, or do not have the permanent right to remain in the UK, you will require a work permit. Do you require a work permit? Yes / No

If YES give details:

Expiry date of any current work permit: (this may not be valid for this post).

• Do you wish to job share this post? Yes / No

• Do you have a current driving licence? : [this may not be essential for the post] Yes / No

• If Commercial, give class of vehicle:

• Is your driving licence "clean"? : Yes / No

If "No", please give details:.....

• Do you have criminal convictions that have occurred during the past 5 years? Yes / No

If "Yes" give details:

(Note: *You do not have to disclose any offence which is a spent offence under the Rehabilitation of Offenders Act 1974*)

Have you at any time been convicted of a crime that has resulted in a prison sentence? Yes / No

If "Yes" give details:

(Note: *You do not have to disclose any offence which is a spent offence under the Rehabilitation of Offenders Act 1974*)

We are an equal opportunities employer. We aim to recruit staff on their suitability for the position advertised, without consideration of age, sex, marital status, disability or ethnic origin. To help us monitor this policy it will help us if you fill in the following section.

- Ethnic origin (Voluntary information). To which of the following groups do you belong? :
 White African Caribbean Asian Chinese Other : (specify)
- Do you consider yourself disabled? Yes / No (please specify on a separate sheet)
- Do you require special arrangements because of your disability, such as access to premises, special seating or any other provision? : Yes / No
 If "Yes" please give details:

Education, Skills and Qualifications

Please list schools, colleges, universities, and ANY other types of education/skills training undertaken since age 14. (continue on a separate sheet if necessary)

Name of establishment	From (mm/yy)	To (mm/yy)	Qualifications

Employment History

- Are you currently employed: Yes / No
 If "No" please state reason:
- Have you ever been dismissed by an employer? : Yes / No
 If "Yes" give details, including the reasons given for your dismissal:

- Salary Requirements (please complete)
- **Your current employer:**
 Name and address of company:.....

 Post code: Telephone number:
- Date started: Date left if applicable:.....
- Job title: Rate of pay:
- Describe your main duties and responsibilities:

- Reason for leaving or wanting to leave:

- **Previous employer (1):**

Name and address of company:.....
.....
Post code: Telephone number:
Date started: Date left:
Job title: Main duties and responsibilities:
.....
.....
Reason for leaving:
.....

- **Previous employer (2):**

Name and address of company:.....
.....
Post code: Telephone number:
Date started: Date left:
Job title: Main duties and responsibilities:
.....
.....
Reason for leaving:
.....

- **Previous employer (3):**

Name and address of company:.....
.....
Post code: Telephone number:
Date started: Date left:
Job title: Main duties and responsibilities:
.....
.....
Reason for leaving:
.....

- Please give the details as above of any other employers you have had in the last 5 years and any other information relevant to your employment history (*continue on a separate sheet if necessary*):

.....
.....
.....

Availability for work

- How much notice will you have to give you current employer? Yes / No
- Is there any other reason why you would not be able to start work immediately if you were offered the job you have applied for?: Yes / No
If "Yes" give details:
- Do you have any existing holiday commitments? Yes / No
If "Yes" give details:
- Do you have outside commitments that could limit your working hours, such as being a JP, a councillor in local government or a member of the TA? Yes / No
If "Yes" give details:
- Do you have any other jobs which you intend to continue? : Yes / No
If "Yes" give details:

The job you have applied for

- Please state **what attracted you to the job** you have applied for and why you think you are a suitable person to do it (continue on an additional sheet if necessary):
.....
.....
.....
.....
.....
.....
- Please give details of any **skills and qualifications and/or experience relevant** to the job for which you have applied (*continue on an additional sheet if necessary*): *eg food hygiene certificate / first aid etc / PA1 or PA6*
.....
.....

Interests and hobbies

- Please give brief details of your main interests and hobbies (*continue on an additional sheet if necessary*):
.....
.....

General Health [optional]

- Are you willing to complete a medical questionnaire? : Yes / No
- Are you in generally good health? : Yes / No
If "No" give details:
- Are you receiving medical treatment ? : Yes / No
If "Yes" give details:
- Have you been vaccinated against tetanus in the last 10 years? Yes / No
(Due to the nature of your work environment, where you will have contact with soil, we recommend that, tetanus vaccinations are kept up to date. Please consult your medical practitioner for advice.)
- Are you currently affected by any medical condition that you feel we should be made aware of? For example epilepsy, diabetes, asthma, allergies, mental illness. Yes / No
If yes please give details:
- Have you in the past 10 years had a period of illness resulting in a long term (more than 4 weeks) absence from work?: Yes / No
If "Yes" give details:

References

Please give details of two people we can contact who are willing to give you a reference and who are not related to you:

(1) Full Name and address:

.....

Telephone number: Home: Mobile:

Occupation & how known to you:

(2) Full Name and address:

.....

Telephone number: Home: Mobile:

Occupation & how known to you:

Pattern of work

- I am applying for full time* / part time* work (delete as applicable)
- I am applying for permanent* / seasonal* work? (delete as applicable)
- I am at school*/college*/university* and am applying for weekend*/holiday work* (delete as applicable)

Please note that as a retail business most permanent staff would be expected to work a retail work pattern which includes some Bank holidays and alternate weekend working.

Please enter the days & hours that you are available to work (Although, 8.00 – 6.00 are the hours our business is open for staff – a full working day is usually 9 hours [incl 60 mins breaks] eg 8.00 – 5.00 / 9.00 – 6.00 / 8.30 - 5.30:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
a.m.	8.00	8.00	8.00	8.00	8.00	8.00	8.00
p.m.	6.00	6.00	6.00	6.00	6.00	6.00	6.00

Additional comments on your work pattern (e.g. preferred days/hours)

.....

Declaration

I declare that the information I have given on this form is correct and that any misrepresentation by me may be sufficient grounds for my dismissal if I am employed.

Signed by Applicant:Date:.....

Consent under the Data Protection Act 1998 - the information given to Hare Hatch Services Ltd in this form will be processed only by Hare Hatch services Ltd for the purpose of considering your application for employment. If you are successful in your application this form and the information in it will be retained in your HR file for such time as you are an employee of Hare Hatch Services Ltd and for up to 6 years after the end of your employment. Otherwise this form will only be retained by Hare Hatch Services Ltd for so long as it is required in connection with your application. By signing this consent you give us your express consent to retain and process all the information contained in this form and to transfer it to countries outside the European Economic area if required.

Signed by Applicant:Date: