



Greenhalgh's Craft Bakery Limited

APPLICATION FOR EMPLOYMENT

Please complete **all** sections and pages of this form clearly using **BLOCK CAPITALS** and tick boxes where required

Position Applied for:	Where did you see the job advertised?
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Section 1 – Contact Information	
Name(s):	Preferred Name: <i>(ie for name badge)</i>
Surname:	
Full Home Address:	Home Telephone Number (inc code):
	Mobile Telephone Number:
	E-mail address:
Post Code:	
National Insurance Number:	
Emergency Contact / Next of Kin details :	Name:
Relationship to you:	Telephone Number(s):

PLEASE NOTE: if your application is successful and any of the above details change, you should notify HR

Section 2 – Personal Details
Do you hold a valid full Driving Licence which is valid in the UK? Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have any current / unspent endorsements / driving convictions: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes please give details:
Do you have category "C" on your Driving Licence? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you legally entitled to work in the UK? Yes <input type="checkbox"/> No <input type="checkbox"/> Are there any restrictions to your residence in the UK? Yes <input type="checkbox"/> No <input type="checkbox"/>
If you are successful in your application, do you require a work permit prior to taking up employment? Yes <input type="checkbox"/> No <input type="checkbox"/>
Note: the Company will require proof of your right to work in the UK before an offer of employment can be confirmed – eg Birth certificate, passport and/or any other appropriate documentation, such as work permits, required to confirm your identity and your right to work in the UK as required by the Asylum and Immigration Act 1996. You will also be asked to provide proof of your home address.
Have you ever been convicted or cautioned for a criminal offence, other than a spent conviction as defined by the Rehabilitation of Offenders Act 1974? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please give details and dates:
Note: Certain roles may require a DBS Records Check. We will ask for your explicit consent if this is required.
Are you currently on any medication that may affect your ability to operate machinery / drive? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes please give details:
If applying for a role which will involve driving, do you suffer from any disability or long term underlying health condition which may affect your driving?: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide details:
Have you been in receipt of incapacity benefit (not unemployment benefit) in the past 8 weeks? Yes <input type="checkbox"/> No <input type="checkbox"/>
If you have taken any periods of Parental Leave (not maternity/paternity leave) please state the dates and duration of this leave:
Would this be your only job? Yes <input type="checkbox"/> No <input type="checkbox"/> If No, state the hours you work elsewhere:

Do you have any holiday commitments? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please state dates:		
Have you previously worked for Greenhalgh's? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, state when, which job and your reason for leaving:		
Do you have any relatives or friends working for Greenhalgh's? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, state name and relationship to you:		
Are you able to handle raw meat? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you able to handle cooked meat? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have any difficulty lifting heavy items? Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you suffer from any allergies or skin disorders? Yes <input type="checkbox"/> No <input type="checkbox"/>		Do you have any Asthma or respiratory problems? Yes <input type="checkbox"/> No <input type="checkbox"/>
English Language Skills (Spoken & Written): Native speaker / Fluent / Basic command / Little-No ability		Other Languages spoken (please specify):

The questions above are asked for monitoring purposes and to determine suitability for certain roles within the business

Section 3 – Employment History & Education			
PRESENT OR MOST RECENT EMPLOYMENT (Including employment outside the UK)			
Name and Address of Employer	From - To	Job Title and Outline of Main Duties	Reason for Leaving
State gross weekly earnings/annual salary:		Notice period required:	

PREVIOUS EMPLOYMENT (Including employment outside the UK) – Continue on an additional sheet if necessary				
Name and Address of Employer	From - To	Job Title	Gross Wage/Salary on leaving	Reason for Leaving

Have you ever been dismissed by an employer or from any office of employment?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have any disciplinary warnings on file or are you currently the subject of any pending investigations or disciplinary actions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever failed to complete a probationary or training period?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes to any of the above, please give details:	

EDUCATION AND TRAINING (Including education outside the UK)

School / College / University	From - To	Examinations Passed
Please give details of additional qualifications or specialist/professional training (including First Aid or Fork Lift Truck Licence):		
Membership of professional bodies or organisations:		

REFERENCES

PLEASE NOTE: We require the details of two employment referees (including your current or most recent employer). If references are obtained, these must prove satisfactory to the Company otherwise any subsequent offer, or employment entered into, may be terminated. If you are unable to provide the details of an employment referee, please provide the details of a professional person who will provide a personal reference, detailing their occupation and relationship to you. Referees should not be a member of your family.

Name of First Referee:	Name of Second Referee:
Address:	Address:
Contact Telephone Number:	Contact Telephone Number:
Email Address:	Email Address:
Job Title/Profession:	Job Title/Profession:
Relationship to you:	Relationship to you:
Do you give permission for us to contact this referee at this time? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you give permission for us to contact this referee at this time? Yes <input type="checkbox"/> No <input type="checkbox"/>

The processing of your personal data is necessary as a legitimate interest for recruitment and selection purposes, and if successful, the performance of your employment contract and for the Company to comply with its legal obligations in relation to your application and employment. The information you supply to us may be used in a number of ways, including for example:

- To consider your application for employment
- To monitor our recruitment processes
- For the administration of your employment, if successful
- To provide you with information
- For performance management and job evaluation
- For statistical analysis

We may also use the information if there is a complaint or legal challenge relevant to this recruitment process. We may check the information collected with appropriate agencies, other third parties or with other information held by us. We may also use or pass to certain third parties information to administer your employment or to prevent or detect crime or in other ways permitted by law. The information contained on this form will be stored in computer and manual records for applicants employed by the Company. Application forms of unsuccessful candidates are kept for a maximum of twelve months. For more information, please ask for a copy of our Data Privacy Policy and Applicant Data Privacy Statement, or visit our website: www.greenhalghs.com

DECLARATION & CONSENT:

I confirm that to the best of my knowledge the information given on this form is honest and accurate. I understand that if I have omitted or given information which I know to be deliberately misleading or false, any offer or employment entered into may be terminated.

I agree that Greenhalgh's Craft Bakery Limited can create and maintain computer and paper records of my personal data in relation to my application, and if successful, my employment with the Company. I understand that this will be processed and stored in line with current legislation and that consent is the most appropriate lawful basis for processing my data. I understand how I may obtain further information and that I am entitled to withhold consent.

I have completed this application form myself (please circle): **YES / NO / Other** (please state).....

Signed:

Date:



Greenhalgh's Craft Bakery Limited

EQUAL OPPORTUNITIES MONITORING FORM

Please complete this form clearly using **BLOCK CAPITALS** and tick boxes where required

Greenhalgh's Craft Bakery Limited is committed to meeting the aims and principles set out in the Company's Equal Opportunities Policy in all its recruitment, employment and training. This includes not discriminating against applicants and employees, who will be judged solely on their merits and suitability for the position applied for or employed in. Furthermore, the Company aims to build an accurate picture of the composition of the workforce in encouraging equality and diversity. Information provided on this form will be treated in the strictest confidence and will only be used by the HR department to monitor the Company's commitment to equal opportunities and to assist people with disabilities attend an interview or take up employment. Filling in this form is voluntary.

Mr/Mrs/Ms/Miss	First Name(s):	Surname:
Position applied for:		

Ethnic Origin:

- White European White Non-European Black Caribbean Black African
 Black other Bangladeshi Pakistani Indian Chinese
 Other or mixed background (please specify) _____ Prefer not to say

Do you consider yourself to have a disability or a long-term health condition?

- Yes No Prefer not to say

What is the effect or impact of your disability or health condition?

If you need us to make any adaptations for your interview to accommodate any disability or health condition, please let us know.

The information in this form is for monitoring purposes only. We will try to provide access, equipment or other reasonable practical support to ensure that people with disabilities can compete on equal terms with non-disabled people. If you believe you need a 'reasonable adjustment', please discuss this with the person running the recruitment process.

Would you describe yourself as:

- Male Female Other, please specify _____ Prefer not to say

What is your sexual orientation?

- Heterosexual Gay Bisexual Other, please specify _____ Prefer not to say

What is your Date of Birth? (Please state in DD/MM/YYYY format): ____/____/____ Prefer not to say

What is your religion or belief?

- No religion or belief Buddhist Christian Hindu Jewish Muslim Sikh
 Other religion or belief, please specify: _____ Prefer not to say

Do you have caring responsibilities? If yes, please tick all that apply

- None Primary carer of a child/children (under 18) Primary carer of disabled child/children
 Primary carer of disabled adult (18 and over) Primary carer of older person
 Secondary carer (another person carries out the main caring role) Prefer not to say

Declaration & Consent

I understand that the information I have provided above will be recorded and processed by Greenhalgh's Craft Bakery Limited in accordance with current data privacy and equality legislation. I agree to my data being processed and stored confidentially.

Signed..... Date.....

For further information about how your data is stored, please ask for a copy of our Data Privacy Policy and Applicant Data Privacy Statement, or visit our website.

OFFICE USE ONLY:

Interviewer to complete interview summary & notes:					Comments: (Consider: temperament, appearance, communication, eye contact, understanding of role, suitability, experience, enthusiasm, etc):
	<u>Poor</u>	<u>Fair</u>	<u>Good</u>	<u>Excl</u>	
Work History:	1	2	3	4	
Previous Experience:	1	2	3	4	
Appearance:	1	2	3	4	
Communication/understanding:	1	2	3	4	
Commitment and enthusiasm:	1	2	3	4	
General Impression/Suitability:	1	2	3	4	

1st Interview by:	
Name:	Date:
2nd interview recommended (where relevant)?	Offer recommended?
YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
2nd Interview by:	
Name:	Date:

HR USE ONLY:

Document Originals seen & copied:	State:
<input type="checkbox"/> Current passport showing the individual is a British citizen or has the right of abode in the UK <input type="checkbox"/> Proof of National Insurance number (NI card, Government document, previous payslip or similar) <input type="checkbox"/> Original copy of birth or adoption certificate issued in the UK <input type="checkbox"/> Current, valid EU / EEA National Identity Card <input type="checkbox"/> Current biometric residence permit <input type="checkbox"/> Relevant visa details stating permission to remain and work in the UK <input type="checkbox"/> Proof of address (eg bank statement, utility bill, government document) <input type="checkbox"/> Other, please state:	
Are the documents presented of satisfactory condition and show a right to work in the UK?	YES / NO
Recruiting Officer to have sight of original documentation & check if satisfied with the following:	✓ & Initial
1. Documents are genuine, not tampered with and that the person presenting them is the rightful holder? 2. Photographs consistent with the persons appearance across all documentation (where applicable)? 3. Dates of birth consistent across documents and with the person's appearance? 4. Names consistent across all documents? (Where not, supporting documents such as marriage certificate, divorce decree, deed poll original documents should be provided and copied) 5. Expiry dates for permissions to be in the UK have not passed? 6. Address details are consistent across all documents? 7. Do any work restrictions apply?	
Any disability or underlying health condition declared?	YES / NO
DBS Criminal Record Check required?	YES / NO / NA
Have sufficient details regarding previous employment and experience been provided?	YES / NO
Role suitability – does the candidate have experience and/or training relevant to role applied for?	YES / NO
State level: Excellent / Good / Fair / Poor	
Processing Consent received?	YES / NO
Offer to be made?	YES / NO
Comments:	
Signed:	Date: