

# Application for Employment with London Thamesport



Please complete in BLOCK CAPITALS and answer all questions as fully as possible, tick boxes where appropriate. All information will be treated in confidence. You may wish to attach a Curriculum Vitae to accompany your application form, but this will not in any way replace the information you provide on this form.

**Please note that in line with the requirements of the Road Traffic Act 1988 a minimum age of 21 is applied to all quayside vacancies**

Position applied for:	Where did you hear about this vacancy?	Vacancy reference:
<b>Personal Details</b>		
Title:	Address:	
Surname:	_____	
First Name(s):	_____	
Home Tel:	_____	
Mobile:	Postcode: _____	
Work Tel:	May we contact you at work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a full UK Driving Licence?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have your own transport?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you hold any driving licences other than your motorcar licence? If yes, please give details:-		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any licence endorsements? If yes, please give details, including offence code and date(s):-		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you require authorised documentation to work in the UK? If yes, please state the documents and requirements:-		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a member of any professional bodies? If yes, please state which:-		<input type="checkbox"/> Yes <input type="checkbox"/> No

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Have you ever been convicted of any criminal offences, which are not yet 'spent' under the Rehabilitation Act 1974?

Yes  No

If yes, please give details:-

## Health

Please note that you will be required to undergo a medical examination, which will include a drug and alcohol test before any offer of employment can be confirmed. A disability or health problem does not preclude full consideration for the job, and applications are welcome from people with disabilities who think they could do the job applied for with reasonable or no adjustments

How many days have you been absent from work due to illness in the last two years?

How many occasions did this consist of?

Disability is defined as a 'physical or mental impairment, which has substantial and long term effect on a person's ability to carry out normal day-to-day activities'.

Do you have a disability?

Yes  No  I do not wish to disclose this information

Do you require us to make special arrangements to enable you to attend an interview

Yes  No

If yes please provide details:-

## Education

Secondary School(s) Attended	Qualification(s) gained (including level and grade)	Subject(s)

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Education		
Further Education	Qualification(s) gained	Subject(s)
University/Polytechnic College(s)	Qualification(s) gained	Subject(s)
Professional Qualifications		
Professional/technical training e.g. institute, chartered society	Qualification(s) gained (indicate if by examination)	Subject(s)



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Current Employment	
Nature of business:	Name and full address of employer _____
Current position held:	_____
Start date:	_____ Post Code _____
Total annual earnings: £ (including expenses and overtime)	Other benefits:

Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason(s) for wishing to leave:  
 \_\_\_\_\_

Employment History					
Name and full address of employer	Dates		Appointment, job title, reporting to, duties and achievements	Reason for leaving	Final salary and benefits
	From	To			

Have you previously applied for a job, or been employed by this Company, or any associated or subsidiary Company?  Yes  No  
 If yes, please give details including your Employee Number:-

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## Supporting Information

Please provide supporting information in support of your application. Consider how you would suit the position applied for, detailing any relevant training/experience that you have. Please continue on a separate sheet if required.

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Please give names and addresses of two referees. If you are leaving school, or have left in the last 2 years please give the name of your Head Teacher as a referee.

Current/ Most Recent Employer	Previous Employer
Name and full address _____ _____ _____ _____ _____ _____ Postcode: _____	Name and full address _____ _____ _____ _____ _____ _____ Postcode: _____
Tel No:	Tel No:
Occupation:	Occupation:
Relationship:	Relationship:
When may we contact your present employer?  Now <span style="float: right;">q</span> After first interview <span style="float: right;">q</span> After second interview <span style="float: right;">q</span> After an offer has been made <span style="float: right;">q</span>	To provide consent for us to action references as specified please sign below:  _____ Signature _____ Date

I declare that the information contained in this form is true and complete. I understand any false or misleading information given by me in this application form, or during an interview or medical examination may result in my dismissal without notice, if I am appointed.

I consent to the information I have given on this application form and in all other enclosed documentation being held, used and updated under the security safeguards of the Data Protection Act 1998.

\_\_\_\_\_  
Signature \_\_\_\_\_ Date

**When complete please return this form to:  
London Thamesport, HR Department, Isle of Grain, Rochester, Kent, ME3 0EP**

