



CONFIDENTIAL

APPLICATION FOR EMPLOYMENT:
TRANSPORTER DRIVER

Personnel Department, Car Collection Services, Pen-Y-ffordd, Nr Chester, CH4 0EP.
Tel: 01244 550589 / Fax: 01244 547352

Please complete all sections of the form using BLACK INK.
Once completed, please post this application form to the above address

PERSONAL DETAILS

Full Name: _____

Address: _____

Post Code: _____

Telephone No (home): _____ (work): _____

Date of Birth (dd/mm/yy): _____ Nationality: _____

Marital Status: _____ No of Children: _____

National Insurance No: _____

MEDICAL HISTORY

Is your hearing impaired?_____ Is your vision impaired?_____

Have you ever received treatment for Diabetes? _____
Epilepsy? _____

Do you suffer from any other illness / disability which could affect your driving ability? If "YES" please give details: _____

CRIMINAL OFFENCES

Do you have any criminal convictions?
If "YES" please give details: _____

UNION MEMBERSHIP

Union Membership Subscriptions are paid for via pay roll.

Are you a member of any road transport union?
If "YES" please give details: _____

SUPPORTING INFORMATION

Please use this section to explain why you applied for the job and why you think car transportation will suit you: _____

DRIVING LICENSE DETAILS

Date Passed (dd/mm/yy): _____

License Number: _____

Type of License: _____

OTHER DRIVING LICENSES HELD

What groups? _____

Valid from: _____ To: _____ (dd/mm/yy)

Endorsements (if any):

Conviction Dates	Offence Code	Fine

EMPLOYMENT DETAILS

Name and Address of most recent employer: _____

Telephone No: _____

Nature of Business: _____

Job Title: _____

Salary / Wage: _____

EMPLOYMENT HISTORY

Please list all past employers, most recent first.

Employer	Job Title	From	To	Reason for Leaving

EDUCATION AND TRAINING

Secondary School Education	From	To	Qualifications Gained
Education and Training after School	From	To	Qualifications Gained

ACTIVITIES AND INTERESTS AWAY FROM WORK

REFERENCES

Please provide two reference by people who are able to comment on your work experience and your suitability for the position applied for (These should not be relations). One should be your present or most recent employer.

Name: _____	Name: _____
Position: _____	Position: _____
Company: _____	Company: _____
Address: _____	Address: _____
_____	_____
_____	_____
Post Code: _____	Post Code: _____
Tel: _____	Tel: _____
Capacity in which known: _____	Capacity in which known: _____
_____	_____

DECLARATION

I, the undersigned, attest that all the information presented in this application is true to the best of my knowledge.

Name: _____

Signed: _____

Date: _____