



Please return to:
 SOS Motorcycle Recovery
 Unit 2 Isaac Newton Way, Grantham, NG31 9RT

**Office
 Use
 Only**

EMPLOYMENT APPLICATION FORM

Position Applying For: _____

PERSONAL DETAILS

Name:

Address :

.....

.....Postcode:

Daytime tel: Home tel:..... Mobile tel:.....

Date of Birth: National Insurance Number:

Email Address:

Do you need a visa or work permit to work legally in the UK? Yes / No If yes, do you have one? Yes / No Please attach copies

Do you have your own transport? Yes / No What times are you available for work? Days / Nights / Weekends

DRIVING DETAILS (for rescue/recovery technicians only)

Do you have a current car/LGV driving license? Yes / No Driving License Number:.....

How many years have you had your license?..... Do you have a current motorcycle license? Yes/No

Please give details of any accidents/endorsements you've had within the last 5 years:

Date	Details (please give amount of fine, no. of points and length of ban for any traffic offenses)

QUALIFICATIONS/EDUCATION

Name of school, college etc	Please list qualifications gained

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PREVIOUS EMPLOYMENT

Last/Current Employer:

Company name

Address

Phone number Contact

Date started Date left

Job Title Final Salary

Notice Period

Reason for leaving

Brief description of duties

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.....

.....

Please give details of your previous employment:

Company Name	Date Began	Date left	Duties - please describe	Salary	Reason for leaving

HEALTH

How many days have you had off from work due to sickness in the last 2 years?

Do you have any health issues which may affect your ability to carry out the job you have applied for? Yes / No

If Yes, please provide details:

.....

Please note: all employment is subject to the receipt of satisfactory references. All references will be taken up.

TIME OFF

Do you have any holidays planned or booked within the next 12 months? Yes / No If yes please give details below

Do you have any hospitals appointments/ treatments/operations etc planned or booked within the next 12 months? Yes / No If yes please give details below

Date from	Date to	Reason (ie Holiday, hospital appointment)

DISCLOSURE

Have you ever been convicted of any criminal offenses, or do you have any charges pending? Yes / No

If Yes, please give details:
.....
.....

DISCLAIMER

Please check all the details you have provided, then read and sign the statement below

I understand that if I have given any information that is not correct this may affect my current or future employment with SOS Motorcycle Recovery. I undertake to inform SOS Motorcycle Recovery straight away of any changes to the information stated here. I also understand that any job offered to me by SOS Motorcycle Recovery is subject to the details above being correct, to my references being satisfactory and to me passing an initial training and assessment period and then a 3 month probationary period.

Signed: Dated:

OFFICE USE ONLY

Interview Notes:
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Date Started with SOS: Starting Salary:

Shift: Days Off:.....

Date left: