

Return to:—

**APPLICATION FORM: F. HINDS LTD.**

Head Office: 24 PARK ROAD, UXBRIDGE, MIDDX. UB8 1NH

**DATA PROTECTION ACT 1998**

Personal details submitted on this application form will be filed and stored in our database. By signing this form you have given your explicit consent to this.

<p><b>SURNAME</b> Mr/Mrs/Miss</p>	<p><b>FIRST NAMES</b> MAIDEN NAME</p>
<p><b>BRANCH</b> <b>POSITION APPLIED FOR</b></p>	<p><b>NATIONAL INSURANCE NUMBER</b> This must be supplied otherwise payment may be delayed or withheld.</p>
<p><b>HOME ADDRESS</b></p>	<p><b>HOW LONG HAVE YOU LIVED AT THIS ADDRESS?</b></p>
<p><b>TELEPHONE NUMBER</b></p>	<p><b>OWNER OCCUPIER/RENTING/ LIVING WITH PARENTS/LODGING</b> (Delete as appropriate)</p>
<p><b>DATE OF BIRTH</b> <b>PLACE OF BIRTH</b> If not in UK, state date and place of entry to UK</p>	<p><b>NATIONALITY</b></p>
<p><b>NEXT OF KIN</b> <b>TELEPHONE NUMBER</b> <b>MOBILE NUMBER</b></p>	<p><b>ADDRESS</b></p>
<p><b>MEDICAL HISTORY</b> Please give brief details and dates of any serious illness, operations and disabilities within the past ten years and state whether currently under treatment or receiving any form of medication or drugs.</p>	
<p><b>DO YOU CONSIDER YOURSELF TO HAVE A DISABILITY? YES/NO</b> This information is needed so all applicants who have a disability and meet the minimum criteria for this position are offered an interview.</p>	
<p><b>HOBBIES</b></p>	
<p><b>HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OR CIVIL OFFENCE? YES/NO</b></p>	
<p><b>HAVE YOU ANY ALLEGED CRIMINAL OR CIVIL OFFENCES OUTSTANDING AGAINST YOU? YES/NO</b> If the answer to either question is yes, give details on a separate sheet of paper.</p>	

<b>INTERVIEWER'S USE ONLY</b>	
INTERVIEWED BY.....	DATE .....
APPOINTMENT OFFERED YES/NO STARTING DATE.....	SALARY.....
<p><b>TWO WRITTEN REFERENCES REQUIRED.....</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p><b>PRECISE DETAILS OF DAYS AND HOURS TO BE WORKED</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>