

NEWTEC



APPLICATION FOR NEWTEC RECRUITMENT AGENCY (Please complete in black ink or type)

<p>Only give a daytime no. if you can receive calls</p>	<p>1. PERSONAL DETAILS</p> <p>Title _____ Last Name _____ First Name _____</p> <p>Home Address _____ _____ _____</p> <p>Post Code _____</p> <p>Telephone No. (Day) _____ Mobile No. _____</p> <p>Telephone No. (Eve) _____ Email _____</p> <p>Are you required to hold a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, When does it expire? _____</p> <p>Permit Number _____ National Insurance Number _____</p> <p>CRB Number _____</p>
	<p>Please give details of all previous employment. Continue on a separate sheet if necessary</p>

3. EDUCATION (Secondary School Onwards)				
Continue on a separate sheet if necessary	From	To	Place of study	Courses undertaken and Qualification's gained

4. TRAINING & SHORT COURSES				
Detail non-qualification training you have undertaken.	From	To	Name of Institution	Courses Undertaken

5. FITNESS TO WORK QUESTIONNAIRE

Do you or have you ever suffered from :

Fainting attacks	Yes / No	Back pain	Yes / No
Blackouts or seizures	Yes / No	Uncontrolled diabetes	Yes / No
Mental illness	Yes / No	Typhoid or Paratyphoid fever	Yes / No
Ear trouble or deafness	Yes / No		
Heart problems or high blood pressure	Yes / No	Other (please specify)	
Varicose vein trouble	Yes / No		

A fitness to work declaration must be received from your GP.

6. JOB CATEGORIES/AVAILABILITY

Please tick the categories below which will best describe your ideal job

5 - day post		
4 - day post		
3 – day post		
2 – day post		
1 - day post		
Maternity		
Holiday		
Day nursery		
Children’s Centre		
Nursery post		
Care of babies		
Care of toddlers		
Care of 3 – 5 year olds		
Care of school age		

7. DATE AVAILABLE TO START _____

8. REHABILITATION OF OFFENDERS ACT

This post is exempted occupation under the Rehabilitation of Offenders Act (1974) (Exemptions) Order 1975. We will, through the Criminal Records Bureau, make a check to establish any criminal record upon offer of employment.

Your signature on the application form will be regarded as signifying your agreement that this may be done. Applicants are not entitled to withhold information about convictions which for other purposes are spent under the Act.

Do you have a Criminal Conviction? Yes No

If yes, please provide details of the conviction and the date. You should seal this information in an envelope marked private and confidential and enclose it with your application form.

9. DISABILITY DISCRIMINATION ACT 1995

The DDA protects disabled people from unlawful discrimination. If you tell us that you have a disability, we will make reasonable adjustments to your working environment and to your work arrangements and practices.

Do you consider yourself to have a disability? Yes No

If yes, please provide further details _____

Please state what additional support you require if requested to attend an interview?

Please state what additional support you require if appointed?

We welcome applications from applicants with a disability and guarantee to interview all disabled applicants who meet the minimum criteria for a job vacancy and consider them on their abilities.

10. HEALTH

Please state the number of days absent from work due to sickness in the last two years and indicate the reason

No. of Days _____ Reason/s _____

11. REFERENCES

Give full contact details of two people who we can contact for references.

Name _____ Name _____

Job Title _____ Job Title _____

Organisation _____ Organisation _____

Address _____ Address _____

Post Code _____

Post Code _____

Telephone No. _____ Telephone No. _____

Fax No. _____ Fax No. _____

Email _____ Email _____

May we contact your referees? Yes No

NEWTEC acts as an Employment Business when sending you to our clients (all group settings) as a temporary worker, and as an Employment Agency when sending you to clients as a candidate for Permanent Positions. NEWTEC will be responsible for paying your salary on behalf of our clients when you carry out assignments as a temporary worker.

10. DECLARATION

I declare that the information given in this form and any other accompanying documents is true and correct and I understand that any omissions or false statements on this form may justify my dismissal from NEWTEC. The information on this form may be processed in accordance with the Data Protection Act 1998

Signature

Date

Mailing address for returning application forms:

**NEWTEC Recruitment
1 Mark Street
London E15 4GY**

Email address for returning application forms:

newtec.recruitment@newtec.ac.uk
Fax no. for returning application forms: **0208 519 6755**
Phone : **0208 519 5843 x 3148**

Recruitment and Selection Monitoring

Post _____

Date _____

	<p>As an equal opportunities employer, monitoring of recruitment and selection is an essential part of good management practice, and is required under the Race Relations (Amendment) Act 2000. It is endorsed by the Equal Opportunities Commission and the Commission for Racial Equality, in order to ascertain whether equality of opportunity is being achieved.</p> <p>Our equal opportunities policy demonstrates a commitment to job applicants and those involved in staff selection that the recruitment process will be conducted as fairly and consistently as possible. With this in mind, all stages of the recruitment process will be monitored.</p> <p>Please fill in this form as fully as possible so that we can monitor the implementation of our Equal Opportunities Policy. The answers you provide in this section will be treated in the strictest confidence and will only be used for statistical monitoring.</p> <p>Rejections</p> <p>NEWTEC reserves the right to decline applicants if the candidate does not meet Company requirements or is not able to be placed for whatever reason, or the references obtained are not suitable.</p> <p>The section will be detached from the application form.</p>								
Please tick one box	<p>ETHNICITY</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; width: 33%;">Asian or Asian British</td> <td style="text-align: center; width: 33%;">Black or Black British</td> <td style="text-align: center; width: 33%;">White or Other</td> </tr> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Chinese <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Other Asian <input type="checkbox"/> Other </td> <td style="vertical-align: top;"> <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Black Other <input type="checkbox"/> Mixed African/White <input type="checkbox"/> Mixed Caribbean/White <input type="checkbox"/> Prefer not to say </td> <td style="vertical-align: top;"> <input type="checkbox"/> White/British <input type="checkbox"/> White/Irish <input type="checkbox"/> White Other <input type="checkbox"/> Other Mixed <input type="checkbox"/> Mixed Asian/White </td> </tr> </table>			Asian or Asian British	Black or Black British	White or Other	<input type="checkbox"/> Chinese <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Other Asian <input type="checkbox"/> Other	<input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Black Other <input type="checkbox"/> Mixed African/White <input type="checkbox"/> Mixed Caribbean/White <input type="checkbox"/> Prefer not to say	<input type="checkbox"/> White/British <input type="checkbox"/> White/Irish <input type="checkbox"/> White Other <input type="checkbox"/> Other Mixed <input type="checkbox"/> Mixed Asian/White
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	<p>AGE</p> <p>How old are you? _____ What is your Date of Birth? _____</p>								
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Please tick one box	<p>GENDER</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Transsexual</p>								
	<p>SEXUAL ORIENTATION</p> <p><input type="checkbox"/> Straight/heterosexual <input type="checkbox"/> Gay woman/lesbian <input type="checkbox"/> Gay man <input type="checkbox"/> Bi-sexual <input type="checkbox"/> Prefer not to say</p>								
Please tick one box Applicant will be required to provide proof of their right to work in the UK	<p>RIGHT TO WORK IN THE UK</p> <p>Are you required to hold a work permit? Yes _____ No _____</p> <p>If yes, when does it expire? _____</p>								