



## APPLICATION FOR EMPLOYMENT PRIVATE AND CONFIDENTIAL

AGM Holdings Plc provides equal opportunities for all job applicants and employees. All applicants are treated in the same way, regardless of age, religious beliefs, political opinion, race, sex, marital status or disability. Equally, promotion and training opportunities are entirely based on an employee's ability and job performance.

**Please complete all parts of this form in your own handwriting using CAPITAL LETTERS and BLACK INK. Where an \* is shown, delete the information that does not apply to you.**

**PLEASE RETURN COMPLETED FORM TO:** HR Manager, Marine Parade, Weston-super-Mare, Somerset, BS23 1AL

Name of Applicant: \_\_\_\_\_ Date application received: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Position applied for: \_\_\_\_\_ NI No: \_\_\_\_\_

### PERSONAL DETAILS

Where did you hear about this vacancy: \_\_\_\_\_ Advert Ref: (if applicable) \_\_\_\_\_

Due to Licensing laws please confirm that you are 18 years old or over: YES / NO\*

Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_

Address: \_\_\_\_\_ Home Number: \_\_\_\_\_

\_\_\_\_\_ Mobile Number: \_\_\_\_\_

\_\_\_\_\_ How far do you live from the site? \_\_\_\_\_

Postcode: \_\_\_\_\_ How will you travel to work? \_\_\_\_\_

Email address: \_\_\_\_\_ Do you have a current full UK driving license? YES / NO\*

Do you require a work permit to work in the UK? YES / NO\* License type Class: \_\_\_\_\_

Are you a student? YES / NO\* State number of endorsements/points: \_\_\_\_\_

### EDUCATION AND TRAINING

Names & addresses of schools & colleges attended since age 11 (starting with most recent)	From	To	Examinations passed and qualifications obtained with grades

Please provide details of any other skills that you feel are relevant to your application: (e.g. languages)  
 \_\_\_\_\_

Please detail any clubs or society memberships:  
 \_\_\_\_\_

Do any of your friends or relatives work for the AGM Group? YES / NO\*  
If yes, please provide details:

Please give details of any previous applications to AGM and/or work experience/previous employment with the Group:

What length of notice do you have to give your present employer?

Please list dates of any holidays already arranged:

If offered this position do you intend to continue working in any other capacity? YES / NO\*

If yes, please provide details:

**EMPLOYMENT HISTORY** *Please give brief details of your employment history starting with your current or most recent employer:*

Name of Company: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone no: \_\_\_\_\_ Nature of business: \_\_\_\_\_

Position Held: \_\_\_\_\_ Salary on leaving: £ \_\_\_\_\_

Were you in charge or responsible for any staff? If so, how many? \_\_\_\_\_

Main duties & responsibilities: \_\_\_\_\_

Reason for leaving/wishing to leave: \_\_\_\_\_

Name of Company: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone no: \_\_\_\_\_ Nature of business: \_\_\_\_\_

Position Held: \_\_\_\_\_ Salary on leaving: £ \_\_\_\_\_

Were you in charge or responsible for any staff? If so, how many? \_\_\_\_\_

Main duties & responsibilities: \_\_\_\_\_

Reason for leaving/wishing to leave: \_\_\_\_\_

Name of Company: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone no: \_\_\_\_\_ Nature of business: \_\_\_\_\_

Position Held: \_\_\_\_\_ Salary on leaving: £ \_\_\_\_\_

Were you in charge or responsible for any staff? If so, how many? \_\_\_\_\_

Main duties & responsibilities: \_\_\_\_\_

Reason for leaving/wishing to leave: \_\_\_\_\_

**ABOUT YOUR EXPERIENCE**

Please explain any breaks in employment:

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How do you use your personality and skills in your work?

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Why is this successful?

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How do you ensure customers remember their visit:

(if you have no previous work experience, please tell us what is your definition of memorable customer service)

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**ADDITIONAL INFORMATION**

**Please use this space to explain why you are applying for this vacancy and how you feel that your transferable skills, related experience, achievements and other information that is relevant to your application makes you the best candidate for this job. You can also use this space to provide information on other skills that you think may be relevant.**

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Please let us know what you like to do in your spare time including hobbies and interests.

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Days available to work: Sun / Mon / Tues / Weds / Thurs / Fri / Sat\*

Permanent / Temporary\*

Shifts: mornings / afternoons / evenings / nights\*

Preferred number of weekly hours: \_\_\_\_\_

Full Time / Part Time\* If part time, please state hours required: \_\_\_\_\_

**REFERENCES**

Please give the names and addresses of two most recent employers to whom we may apply for employment references, or you may choose one personal reference who has known you well for more than two years e.g. college lecturer, school teacher.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Their relationship to you: \_\_\_\_\_

Their relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

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Phone Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Can we take both of these references up now?

YES / NO\*

**DRIVING**

**Have you had:**

- 1. Any accidents within the last three years? YES / NO\*
- 2. Any motoring convictions within the last five years? YES / NO\*
- 3. Any convictions for driving with excess alcohol or drugs within the past 11 years? YES / NO\*

Do you have any endorsements? YES / NO\* Code \_\_\_\_\_ Points \_\_\_\_\_ Date of Conviction \_\_\_\_\_

Code \_\_\_\_\_ Points \_\_\_\_\_ Date of Conviction \_\_\_\_\_

Code \_\_\_\_\_ Points \_\_\_\_\_ Date of Conviction \_\_\_\_\_

**HEALTH**

How many working days off sick have you had in the last 12 months? \_\_\_\_\_

Reason(s) for absense: \_\_\_\_\_

I confirm that I do not know of any reason, cause or symptom that would impair my ability to carry out the duties for the role which I have applied for.

YES / NO\*

**GENERAL**

When are you available for an interview? \_\_\_\_\_

Have you ever been convicted of a criminal offence (other than a motoring offence) which is not a spent conviction within the meaning of the Rehabilitation of Offenders Act (1974)? YES / NO\*

If yes, please provide details: \_\_\_\_\_

Would you be willing for us to obtain a copy of your Police National Computer Record? YES /NO\*

AGM Holdings Plc will use this application form during the recruitment process and in the event that you are offered a position within the company, this form will be kept along with your terms and conditions of employment, training check lists, appraisals, references, absense records, disciplinary discussions and any other documents relating to your employment. Your personal data (and computerised records thereof) may be accessed by the Human Resources Department, Payroll Department, your managers and senior members of management and external administration organisations. Your data may be used for the purpose of the commencement, the continuation, the adherence to, and the termination of your contract of employment, providing and obtaining references, obtaining authorised checks, payment of wages or salary, career development, salary reviews, pension, benefits, administration, disciplinary issues and investigations. In the event that you are unsuccessful, this form will be retained for one year and subsequently disposed of confidentially. Should you leave the company we may on request, (but are not obliged to) supply references in respect of your employment history, including your sickness record, to future employers.

Please confirm that you consent to this processing YES / NO\*

Please check all the answers you have given on this application form and read the statement below carefully before signing it.

I understand that any offer of employment by AGM Holdings Plc is subject to the receipt of acceptable references acceptable to AGM Holdings Plc, and satisfactory medical examination (if required). The Company reserves the right to contact any of my previous employers for the purpose of obtaining references. Any mis-statement in any of the above sections will render the application and any subsequent contract invalid and employment will be terminated immediately and summarily. Consequently, the facts in this application are, to the best of my knowledge, true and complete.

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

**PLEASE RETURN THIS FORM TOGETHER WITH A COMPLETED EQUAL OPPORTUNITIES FORM TO:**

HR Manager, Marine Parade, Weston-super-Mare, Somerset, BS23 1AL