



APPLICATION FOR EMPLOYMENT

Please
Attach
Photograph
Here

PRIVATE AND CONFIDENTIAL

RETURN THIS FORM TO: **SHABRA PLASTICS & PACKAGING LTD**
KILLYCARD INDUSTRIAL ESTATE
CASTLEBLAYNEY
CO MONAHGAN
TEL:042 9749444 FAX: 042 9749424

POSITION APPLIED FOR: _____

ARE YOU AVAILABLE FOR SHIFT WORK: YES: NO: HOW SOON CAN YOU START: _____

SURNAME:

FORENAME[S]:

TITLE:

ADDRESS:

TELEPHONE NO:

MOBILE NO:

CURRENT DRIVING LICENCE:

YES: NO:

TYPE: _____

EXPIRY DATE: _____

DETAILS OF ENDORSEMENTS:

EDUCATION HISTORY:

SCHOOLS/COLLEGES:

QUALIFICATIONS GAINED:

FROM - TO

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

EMPLOYMENT HISTORY:

FROM-TO	NAME & ADDRESS OF EMPLOYER	JOB TITLE	RATE OF PAY	REASON FOR LEAVING

Current Employer: _____

NOTICE REQUIRED IN CURRENT POST: _____



APPLICATION FOR EMPLOYMENT TRAINING ACTIVITY

PLEASE LIST ANY TRAINING RECEIVED OR COURSES ATTENDED OTHER THAN ALREADY STATED WHICH YOU CONSIDER RELEVANT TO YOUR APPLICATION:

DESCRIPTION	DATE

REFERENCES:

PLEASE NOTE HERE THE NAMES AND ADDRESSES OF TWO PERSONS FROM WHOM WE MAY OBTAIN BOTH CHARACTER AND WORK EXPERIENCE REFERENCES:

1:	2:
----	----

LEISURE:

PLEASE NOTE HERE YOUR LEISURE INTERESTS, SPORTS AND HOBBIES, OTHER PASTIMES ETC.

CRIMINAL RECORD:

PLEASE NOTE ANY CRIMINAL CONVICTIONS. IF NONE PLEASE STATE.

HEALTH DETAILS:

PLEASE LIST ANY DISORDERS, DISEASES. ALLERGIES, MUSCULAR OR MUSCULAR SKELETAL INJURIES FORM WHICH YOU HAVE SUFFERED OR DO SUFFER.

PLEASE DETAIL ANY FORM OF MEDICINE, DRUGS OR TREATMENT YOU ARE CURRENTLY AND/OR REGULARLY RECEIVING.

ARE THERE ANY MEDICAL CONDITIONS, WHICH MAY EFFECT YOUR ABILITY TO CARRY OUT THE JOB APPLIED FOR.

NEXT OF KIN: _____

CONTACT PHONE NO.: _____

DECLARATION: [PLEASE READ THIS CAREFULLY BEFORE SIGNING THIS APPLICATION]

I CONFIRM THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT AND THAT ANY UNTRUE OR MISLEADING INFORMATION WILL GIVE MY EMPLOYER THE RIGHT TO TERMINATE ANY EMPLOYMENT CONTRACT OFFERED.

SIGNED: _____

DATE: _____

FOR OFFICE USE ONLY:

INTERVIEW DATE:

OFFER LETTER: Y/N

REJECTION LETTER: Y/N

ACCEPTANCE: Y/N

REFERENCES: Y/N

PASS TO ADMIN: