

# **Job Application Form**

Thank you for your interest in working with Buildsafe Scaffolding (Yorkshire) Limited.

Please complete this application form and return to us via email at info@buildsafescaffolding.co.uk

Applications will only be processed if this form is fully completed. Please print additional pages if you require more space for education and employment history.

Position applied for:	Full time work	Yes	No
Salary expected:	If offered this position will you continue any other work?	Yes	No
Available start date:	If Part time, state days/hours	Days	Hours
Where did you hear about this vacancy?:	Have you previously worked for CCS Developments?		

#### **Personal Details**

Title:		Forenam	ne(s):				Surname:		
Home address:									
Postcode:									
Email address:									
Telephone:						Mobile:			
UTR Number:						NI Number:			
Do you hold a val	id	Yes	No	If yes, e	expiry		Туре:		
CSCS card?				date:					
Do you hold a val		Yes	No	If yes, e	expiry		Туре:		
First Aid Certifica	ate?			date:					
Do you smoke?		Yes	No				ding operates a NO	SMOKING	
						e-cigarettes)	on all premises		
Do you have any		Yes	No	If yes, c	lates:				
holidays booked?				.,				I	
Are you legally eligible for employment in the UK?		Yes	No	Do you have to work in th	proof of eligibility	Yes	No		
Do you have a current UK driving			Yes	No	to work in th	e oki			
licence?	i i ent or	a uriving		163	140				
Pleas	se give d	etails of a	ny curr	ent or pe	nding driv	ing offences o	or endorsements b	elow	
				-					
Please detail ar	Please detail any unspent criminal convictions that you may have (in accordance with the Rehabilitation of								
	•				Act 1974				



# **Employment Details**

Please list past and present employment below, beginning with your most recent.

Name & Address of employer:			
emptoyer.	1		
		Postcode:	
Type of business:		Telephone number:	
Job title:		Name of Manager:	
From MM/YY:		To MM/YY:	
Starting salary:		Leaving salary:	
Describe your responsibili	ties:	Leaving Salary.	
Describe your responsibility	ues.		
Reason for leaving:			
Name & Address of			
employer:			
emptoyer.	1		
		Postcode:	
Type of business:		Telephone number:	
Job title:		Name of Manager:	
From MM/YY:		To MM/YY:	
Starting salary:		Leaving salary:	
Describe your responsibili	ties:	accorning octor y.	
Describe your responsibility	11001		
	1		
Reason for leaving:			
Name & Address of			
employer:			
	-	Postcode:	
Type of business:		Telephone number:	
Job title:		Name of Manager:	
From MM/YY:		To MM/YY:	
Starting salary:		Leaving salary:	
Describe your responsibili	ties:		
December to the second	1		
Reason for leaving:			



Please describe any other work that you have been involved in (e.g. Voluntary, Freelance, Project work, etc.)

Dates/Duration	Description

# **Education, Qualifications and Training**

Please give details of your education, qualifications and training to date, beginning with the most recent. No matter how long ago, please include all details from secondary school to present.

Establishment	Dates From/To	Qualifications/Grades earned

## **IT Ability**

Outlook	Basic	Intermediate	Advanced	Expert	CAD	Basic	Intermediate	Advanced	Expert
Word	Basic	Intermediate	Advanced	Expert	Design	Basic	Intermediate	Advanced	Expert
Excel	Basic	Intermediate	Advanced	Expert	3D Printer	Basic	Intermediate	Advanced	Expert
Powerpoint	Basic	Intermediate	Advanced	Expert	Kitchen Design	Basic	Intermediate	Advanced	Expert
Accounts	Basic	Intermediate	Advanced	Expert	Microsoft Teams	Basic	Intermediate	Advanced	Expert

## **Experience**

Outline any particular experience and skills from previous work/training, or in activities outside of work that you feel show your suitability for the position applied for

### **Hobbies & Interests**

Give details of your main hobbies and interests and the levels to which these are pursued	



#### **Additional Information**

Give any information that you feel will assist us in considering your application		

#### References

Please provide names, addresses and occupations of two separate referees (not relatives), preferably previous employers whom we may approach with regard to your application at a later date

Name	Name	
Occupation	Occupation	
Address	Address	
Email	Email	
Telephone	Telephone	

I declare that to the best of my knowledge & belief that the information provided in this application is correct		
& I consent t	o it being held on file under the terms of the Data Protection Act	
Signature:	Date:	

# For Office Use Only

Application form evaluated by:	Interview date & time:
Interview notes:	
Punctuality:	
Presentation/Appearance:	
Experience:	
Action:	
1st stage INTERVIEW ONE	
2 <sup>nd</sup> stage INTERVIEW TWO	
3 <sup>rd</sup> stage JOB OFFER	
Offer details:	