

WILTON HOUSE

APPLICATION FOR TEMPORARY EMPLOYMENT

CONFIDENTIAL

OFFICE REF:

Application for the post of

SECTION I – PERSONAL DETAILS

Surname

Forenames

Title

Address

Postcode

E-mail
address

Tel. Nos:
Home

Mobile:

Work

Do you hold a full current
car driving licence?

YES/NO

Please give details of any convictions of a criminal offence other than a spent conviction under the Rehabilitation of Offenders Act 1974/Rehabilitation of Offenders (Northern Ireland) Order 1978.

Do you speak any other language(s) other than English? If yes, please specify.

SECTION II - EDUCATION

From/to dates	Name of School/College	Examinations passed

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Do you have any additional qualifications or have you undergone any further training, which is applicable to the post applied for. Please give details.

From/to dates	Details of training/qualifications

SECTION III – EMPLOYMENT HISTORY

Please provide details, **listing present or most recent employer first**. Any gaps in employment dates should be explained.

From/to dates	Name and address of employer and type of business	Job title and main duties	Reason for leaving

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The 2016 season runs from 25th March to 18th September. Is there any time during this period that you would be unavailable to work for?

SECTION IV – RELEVANT EXPERIENCE AND SKILLS

Please state clearly why you are applying for this post and what attributes, experience and skills you have that makes you a suitable candidate.

SECTION V – HEALTH

Please indicate if you have any past or present health problems or disabilities, which could affect your performance in this post.

You may be asked to attend a medical examination for the Estate in accordance with the Access to Medical Reports Act 1988 (Northern Ireland 1991).

SECTION VI – ADDITIONAL INFORMATION

Interests and hobbies – please include membership of clubs, societies etc and whether any office is held.

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SECTION VII - REFERENCES

Names and addresses of two referees are required. One should be your present or most recent employer. The referee must not be a partner or a member of your family.

First Referee

Name Address

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Post code Telephone Number

Second Referee

Name Address

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Post code Telephone Number

May we contact your referees without consulting you first YES/NO

I declare the above information to be complete and true to the best of my knowledge. I have personally completed the application form.

Signature of Applicant Date

Once you have completed your application form please return this to: The Estate Office, Wilton, Salisbury, Wiltshire, SP2 0BJ or email it to admin@wiltonhouse.com