This Form was created in Word using VF Creator.

Created: 11/01/2018 by the VF Creator team.

VF Creator turns documents created in Word into online forms.

You can view/edit eForm features, after installing the VF Creator add-in. A new VF Creator ribbon will be available which allows you to create/edit eForms.



Please visit [VictoriaForms.com](http://www.formpony.com/)/VF-Creator/ to start creating online forms in Word.

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VF Recruitment Specialists

**Personal Details**

Please insert a passport-sized

photo below:

|  |  |  |
| --- | --- | --- |
| Title |  |  |
| Forename |  |
| Surname |  |
| Date of Birth |  |
| Contact Number |  |
| Email |  |
| Address |  |
| Postcode |  | National Insurance No. |  |



|  |
| --- |
| **What Kind of Job are you Interested In?**  |
| Preferred Type of Position |  |
| Are you employed at present? | Yes  No  |
| Are you able to work? | Yes  No  |
| Do you have your own transport? | Yes  No  |
| Do you hold a full current driving licence? | Yes  No  |
| Please give details of any driving offences or convictions? |
|  |

|  |
| --- |
| **Education**  |
| University |  |
| Dates |  | Grade/Results |  |
| University |  |
| Dates |  | Grade/Results |  |
| University |  |
| Dates |  | Grade/Results |  |
|  |  |  |  |
| Do you have any Professional Qualifications? | Yes  No  |
| If YES, please give details |
|  |
| **Employment History** |
| Please attach a resume if you have one. |
| Company |  |
| Start Date |  | End Date |  |
| Job Title |  | Salary |  |
| Duties |  |
| Reasons for leaving |  |
| Have you ever been involved in any disciplinary action or dismissed from an employer? | Yes  No  |
| If YES, please give details |
|  |

|  |
| --- |
| **References**  |
| Please give details for two referees. The references we obtain must cover your last two positions or at least the last three years of your employment history.  |
| Referee 1  |
| Name |  |
| Company |  |
| Position |  |
| Contact Number |  |
| Email |  |
| Address |  |
| Postcode |  |
| Current Employer? |  Yes |  | No |  |
| Referee 2 |
| Name |  |
| Company |  |
| Position |  |
| Contact Number |  |
| Email |  |
| Address |  |
| Postcode |  |
| Current Employer? |  Yes |  | No |  |

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| --- |
| **Health and Disability**  |
| Do you consider yourself to have a disability or any health issues? | Yes  No  |
| If YES, please give details |  |
|  |

|  |  |  |
| --- | --- | --- |
| Do you need a work permit to work in the UK? |  Yes  | No  |
| Declaration |
| I hereby confirm that the information give is true and correct to my knowledge. I consent to my personal data being forwarded to clients. I consent to references being passed onto potential employers.  |
|  |  |
| Name  |  | Date |
|  |

Signature