



APPLICATION FORM

COMPLETING THIS APPLICATION FORM.

Please complete all sections in your own handwriting, even if you are enclosing your current CV. Please note that we will not contact any referees until a job has been offered. The completed application form should then be sent to:-

Cousins Personnel Department, Cousins Furniture Ltd., Head Office, Manchester Street, Oldbury, West Midlands B69 4HH

ABOUT YOU

Title:	Surname:	First Name(s):
Address:		Postcode:
Tel Home:	Tel Work:	Tel Mobile:
Email Address:	Date of Birth:	Marital Status:
Do you have a current driving licence? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any driving convictions? (Please give details):	
Do you have any disabilities which could affect this application? (If yes please give details):		
How many days have you taken off work in the last two years due to sickness?:		
Do you have any medical condition that could affect your ability to perform the duties of the job that you are applying for? (Please give details):		
Have you ever been convicted of a criminal offence? (If yes, please give details):		

ABOUT THE JOB FOR YOU

Cousins Store: BIRMINGHAM <input type="checkbox"/> DUDLEY <input type="checkbox"/> MANCHESTER <input type="checkbox"/> HEAD OFFICE <input type="checkbox"/>	On what date would you be able to start work?
Position applied for:	
Salary expected:	Full Time: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part Time: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If part time what hours?:
Have you worked for us before? (If yes please give details: When? and Which store?)	
Have you applied to us before? (If yes please give details):	
Have you any relatives working for us? (If yes please give names and relationships):	

INTERESTS

Please give brief details of your hobbies and any sports:

SCHOOL AND FURTHER EDUCATION QUALIFICATIONS

Name/address of school/college:

Subject:

Level/grade obtained:

Date obtained:

Professional membership and qualifications:

REASONS WHY YOU SHOULD EMPLOY ME!

Please explain why we should employ you - including relevant skills, experience etc.:

EMPLOYMENT HISTORY

Current/last employer:

Type of business:

Job title and main responsibilities:

Date started:

Date left:

Starting salary:

Current/final salary:

Reason you want to leave/have left:

Previous employer and type of business

Job title and main responsibilities:

Date started:

Date left:

Starting salary:

Leaving salary:

Reason for leaving:

Previous employer and type of business

Job title and main responsibilities:

Date started:

Date left:

Starting salary:

Leaving salary:

Reason for leaving:

Previous employer and type of business

Job title and main responsibilities:

Date started:

Date left:

Starting salary:

Leaving salary:

Reason for leaving:

REFERENCES Please remember to give details of referees, ie., complete addresses and telephone numbers.
Please provide the names of two employment referees, including your current or most recent employer.

Name:

Address:

Postcode:

Occupation:

Telephone:

Name:

Address:

Postcode:

Occupation:

Telephone:

Where did you hear about this job?

The details given on this application form are, to the best of my knowledge, true and complete.

Signed:

Date:

OFFICE USE ONLY Summary of the candidate's skills and flexibility.

Interviewer:

Interviewer:

Date:

Date:

Comments

Comments

NO B4 IV | HOLD B4 IV | 1st IV | 2nd IV | NO SHOW | NO AFTER 1st IV | NO AFTER 2nd IV | HOLD AFTER 1st IV | HOLD AFTER 2nd IV | OFFER