

Details of Current Employment

Name and address of employer	Start Date	Reason for leaving	Notice required	Salary and benefits

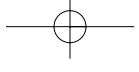
Job title _____ Reporting to _____

Briefly describe your current/previous or most relevant employment, highlighting duties, responsibilities, skills or experience gained which will support your application for the position. If you are a school or college leaver, please include details of vacation or part-time employment. If returning to work after a break in your career, please detail any achievements/qualifications obtained during the period.

Details of Previous Employment *(including voluntary, home-based or part-time work)*

Name and address of employer	Position held	Dates		Salary and benefits	Reason for leaving
		From	To		

Continue on separate sheets if necessary



Additional Information

Please describe your leisure interests, hobbies and other relevant activities

Describe a successful team (work or leisure) you have been a member of and explain your role and what made the team successful

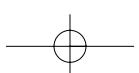
Please describe an achievement that made you particularly proud

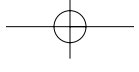
Please explain your view of safety in the workplace

Please explain your reasons for applying and what you consider makes you a good candidate

Please give any other information you consider relevant in support of your application

Continue on separate sheets if necessary





References

Present/Last Employer	Previous Employer/College	Personal Reference (someone who has known you for past three years) Please state capacity in which they are known to you.

Health & Safety

How many working days have you lost through illness in the last year? _____

Do you smoke? Yes / No

Have you had an occupational accident in the last two years? Yes / No
(If yes, please give details on a separate sheet)

Please give details and dates of any serious illness, or hospital treatment over the last two years and any current medical conditions:

Employment Restrictions

Do you have a full UK driving licence? Yes / No Do you have your own transport? Yes / No

Do you have any endorsement? Yes / No *(If yes please give details)*

Do you have any current criminal convictions? Yes / No *(If yes please give details)*

Are there any restrictions to your residence in the UK which might affect your right to take up employment in the UK?

Yes / No *(If yes please give details)*

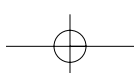
If you are successful in your application would you require a work permit prior to taking up employment?

Yes / No *(If yes please give details including the date your leave expires)*

Declaration

I confirm the details contained within this application form are complete and accurate to the best of my knowledge. I accept that providing false information could result in my dismissal.

Applicant's Signature _____ Date _____



Aylesford Newsprint

Employment Application

An SCA Forest Products
and Mondi company

Aylesford Newsprint Ltd
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Bellingham Way
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Kent ME20 7DL

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Fax: 01622 796466
email: hr@aylesford-newsprint.co.uk
www.aylesford-newsprint.co.uk

EQUAL OPPORTUNITIES MONITORING FORM

Aylesford Newsprint Ltd is committed to the elimination of discrimination throughout its employment practices. In order to ensure the assessment of applications is based only on qualifications, experience, skills, abilities and knowledge, we have split the application form into two parts. This section includes information which has the potential to lead to bias or discrimination. It will therefore be removed during the shortlisting and interview stages of recruitment.

Personal Details

Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Place of Birth	_____	
Date of Birth	_____	

Ethnic Origin

<p>White</p> <p>British <input type="checkbox"/></p> <p>Irish <input type="checkbox"/></p> <p>Any other White background <input type="checkbox"/></p> <p>Please specify _____</p> <p>Mixed</p> <p>White and Black Caribbean <input type="checkbox"/></p> <p>White and Black African <input type="checkbox"/></p> <p>White and Asian <input type="checkbox"/></p> <p>Any other Mixed background <input type="checkbox"/></p> <p>Please specify _____</p> <p>Chinese or other Ethnic group</p> <p>Chinese <input type="checkbox"/></p> <p>Any other Ethnic group <input type="checkbox"/></p> <p>Please specify _____</p>	<p>Asian or Asian British</p> <p>Indian <input type="checkbox"/></p> <p>Pakistani <input type="checkbox"/></p> <p>Bangladeshi <input type="checkbox"/></p> <p>Any other Asian background <input type="checkbox"/></p> <p>Please specify _____</p> <p>Black or Black British</p> <p>Caribbean <input type="checkbox"/></p> <p>African <input type="checkbox"/></p> <p>Any other Black background <input type="checkbox"/></p> <p>Please specify _____</p>
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Do you consider yourself to have a disability Yes / No

If yes, please state nature of disability:

The Disability Discrimination Act defines disability as:

“A physical or mental impairment which has a substantial and long-term adverse effect on the person’s ability to carry out normal day-to-day activities.”

How did you hear of this position?

Friend/Relative Newspaper/Magazine Noticeboard Website

Please specify:

THANK YOU FOR COMPLETING THE QUESTIONNAIRE

