





# WENTBRIDGE HOUSE

Hotel, Restaurant & Brasserie

<b>Employment Details</b>				
Please detail all periods of employment, self-employment, agency employment and unemployment in the last 10 years starting with the most recent. <i>Please continue on a separate sheet if necessary.</i>				
Name and Address of Employer	From	To	Finishing Salary	Reason for leaving
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<b>Secondary Schools Attended</b>	From	To	Courses Taken	Grade Achieved
<b>College/University</b>	From	To	Courses Taken	Grade Achieved

**Days and Hours You Can Work**  
Please outline the days and hours of the week you would like to work. Please indicate the earliest starting and latest finishing times.

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**Additional Information**

Do you have any unspent convictions? Yes  No

*(Declaration subject to Rehabilitation of Offenders Act 1974)*

If yes, please give details:

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Have you worked for the Company before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, where?		
Position:	From:	To:

Do you suffer from any disability and/or medical condition which may affect your ability to carry out the duties of the position for which you are applying?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please give details:		
<i>(This information will enable us to make necessary arrangements and/or to consider what reasonable adjustments can be made to accommodate you)</i>		
Do you smoke?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
How many days sick absence have you had in the last twelve months?		

<b>References</b> Please give references with your two most recent Employers.		
	(1)	(2)
Name:		
Position:		
Company Name and Address:		

How much notice must you give?	
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<b>Declaration</b> I declare that, to the best of my knowledge, the information supplied in this form is accurate and true in all respects. I understand that my employment is subject to my references. I agree that Wentbridge House Hotel shall not be liable in any respect if my application is rejected or my employment terminated because of the falsity of answers or omissions made by me in this application form. I will undergo a medical examination if asked to do so.	
Signed:	Date:



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## Optional

### Equal Opportunities Questionnaire

Wentbridge House Hotel has adopted an equal opportunities policy to ensure no employee or job applicant shall receive less favourable treatment on the grounds of race, sex, age, marital status, disability, religion or political beliefs. The Company monitors this policy through compiling information about its employees and job applicants.

To enable the company to undertake this monitoring process, please complete all of this section. Completion of this section is, however, voluntary and you will not be penalised should you decline to do so.

This information is compiled for statistical purposes only. It does not form part of our selection process.

Ethnic origin:	White European / Black African / Black Caribbean / Asian / Oriental / White other / Black other / Other
Other Please specify:	