Please give details of how you spent your time during any gaps in your	our employment history.		
INTERESTS, LEISURE ACTIVITIES (e.g. hobbies,	sports, club memberships)		
SUPPLEMENTARY INFORMATION			
Please set out below any further information to support your applica	ition, e.g. past achievements, futu	re aspirations, personal strengths.	
DECLARATION			
I declare that the information given in this form is complete and accuomissions will disqualify me from employment or may render me liab		information or deliberate	
I understand these details will be held in confidence by the Company administration and payroll administration (where applicable) in comp			
Signature:		Date:	
REFERENCES			
Please give the names of two people (one of which should be your p for a reference.	resent or most recent employer) whom we may approach	
Can we approach your current employer before an offer of employn	ment is made? YES	NO	
Name:	Name:		
Position:	Position:		
Address:	Address:		
Tel.No:	Tel.No:		



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Name				
Position applied for:				
Are you looking for:	Full time emp Part time em Casual work		are you available?	
Have you applied for e	employment with this (Company before?	Yes No	
Do you need a work p	permit to take up empl	oyment in the UK?	Yes No	
f Yes, type:		Expiry date:		
Do you need accomm	odation?		Yes No	
From where / whom o	lid you hear of this vac	ancy?		
Please return this form	n to:			
OFFICE USE ONLY				
Date form received:	Regret:	lst Interview:	2nd Interview:	Appoint:

Private & Confidential

This form enables us to give careful consideration to your application and you are asked to answer all questions fully with the assurance that we shall observe the strictest confidence.

PERSONAL DETAILS	5				
Mr Miss Mrs	Ms		(Pleas	se complete this section in BLOCK CAPITALS	
Surname:			Previous Name:		
First name(s):					
Permanent Address:			Present Address (if different)		
Post	Code:		Post Code:		
Home Tel No:		Mobile Tel No:			
National Insurance No:					
What languages do you speak?			Level of competency		
Are you a member of any Prof	essional organisati	ons or associations?		YES NO	
Please name:				VES	
Have you any convictions? (oth Rehabilitation of Offenders Act		victions under the		YES NO	
If YES, please give full details					
EDUCATION					
Schools since aged 11	From	То	Examinations & Resul	lts	
College or University	From	То	Courses & Results		
Further Formal Training	From	То	Diploma/Qualification	1	

Job Related Training Courses: Name of Organisation		Date		Subject				
EMBI OVA	AENIT DE	FALLS						
EMPLOYMENT DETAILS Are you currently employed? YES NO PRESENT/LAST EMPLOYMENT								
From	То	Name, Address, Tele of Employer	elephone		osition Held/Outline Duties		Final salary	
Reason for Leaving:				Period of Notice required:				
PREVIOUS	EMPLOYMI	ENT						
From	То	Name, Address, Telephone of Employer		Position Held Reaso		Reason for I	n for Leaving	