

Application Form

Please make sure you answer all the questions on this form, and send us all the documents we ask for. Complete this form in CAPITAL letters and use black ink.

PERSONAL DETAILS

Full Name

Home Address

Postcode

Preferred Work Location(s)

CONTACT DETAILS

Home Tel No

Mobile Tel No

Email

Linkedin profile

Twitter

Facebook

QUALIFICATIONS

COMPANIES YOU ARE CURRENTLY WORKING FOR

COMPANIES YOU HAVE A PARTICULAR INTEREST TO WORK FOR

COMPANIES YOU DO NOT WANT TO WORK FOR

JOB SPECIFICATIONS

Preferred Position

What type of work you looking for ? temp perm part-time fulltime contract

IMPORTANT INFORMATION

Have you ever had a conviction? YES NO If YES please provide details

Number of sick days in last year

Have you suffered any disabilities or illnesses in past 3 years? YES NO If YES please provide details

Do you have a full UK Driving License? YES NO Do you own a vehicle? YES NO

How did you hear about us?

PLEASE SUPPLY THE NAMES OF 2 REFERENCES WITHIN THE LAST 2 YEARS

DAKSTA LTD

Please read the following declaration and tick the box to agree

By ticking this box you consent the company using and keeping the information you have provided. This information will be used in the recruitment process and your details kept on file at DAKSTA Ltd. Any information relating to equality such as gender, ethnic origin or disability is used for monitoring purposes only and will in no way whatsoever form part of the application process. The information I have supplied in this application form is accurate to the best of my knowledge.

I agree – tick box

Signature

Date