

APPLICATION FORM - ELITE GRAPHICS

ONLY INFORMATION PROVIDED ON THIS APPLICATION FORM WILL BE CONSIDERED BY THE COMPANY. Curriculum vitae will not be accepted. Candidates will outline clearly how their qualifications and experience meet both the essential and preferred requirements. All information given will be treated with the strictest confidence. Continuation sheets may be added if necessary.

1. POSITION APPLIED FOR _____

2. PERSONAL DETAILS

Surname:	Tel number (Home):
Forenames:	Tel number (Mobile)
Mr/Mrs/Ms:	Tel number (Work):
Address:	Postcode:

Do you have the right to work in the UK?

Yes No

Note: the company will require proof of this right before an offer of employment can be confirmed - eg. Birth certificate and/or any other appropriate document required to confirm your right to work in the UK as required by the Asylum and Immigration Act 1996?

3. EDUCATION

From	To	Type of School (i.e. Grammar/ Secondary)	Examinations taken and Qualifications Gained (Specify Grades)

4. FURTHER/ HIGHER EDUCATION

From	To	Name of Institution (state if Full - or- Part Time)	Subjects Taken and Qualifications Gained (Specify Grades or Degree Class Obtained)

5. MEMBERSHIP OF PROFESSIONAL ORGANISATIONS

Date Joined	Institute/ Organisation	Grade Of Membership (Where appropriate)
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6. EMPLOYMENT RECORD (Please list chronologically, starting with current or last employer)

Name and Address of Employer and Nature of Business:	From: To:	Job Title: Job Function/ Responsibilities:	Final Salary and Reason for Leaving

7. TRAINING

Details of training courses attended and awards achieved, including dates, if appropriate

8. SUITABILITY FOR THIS POSITION

Please detail your suitability for this position under the relevant headings below - stating when and where skills and experience were gained

Criteria 1

Criteria 2

Criteria 3

Criteria 4

9. DISABILITY DISCRIMINATION ACT 1995

Section 1 of this Act describes a disabled person as a person with a 'physical or mental impairment which has a substantial or long-term effect on his/her ability to carry out normal day-to-day activities'.

Using this definition, would you consider yourself to be disabled? Yes No
(please tick as appropriate)

If yes, do you require any special arrangements to be made to assist you is called for interview?

Please provide details:

10. REFEREES

Please give the details of two work related referees, including your current or most recent post. Referees will not be contacted without your prior approval.

Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Telephone No.:	Telephone No.:
Nature of Relationship:	Nature of Relationship:

11. VERIFICATION OF INFORMATION

I certify that all information which I have provided is correct. I understand that any false information given may result in a job offer being withdrawn.

Signature:

Date:

This Application Form must be return to:

**ELITE GRAPHICS
129 Tullysaran Road
Armagh
BT61 8HF
Tel: 028 3754 8555**