



# employment application

Position applied for

Received		Interview			Start	
----------	--	-----------	--	--	-------	--

### About you

Title	Mr/Mrs/Miss/Ms* <small>*delete those not applicable</small>	Home phone number	
Forenames			
Surname		Mobile number	
Address		Email address	
	Postcode		
Date of birth*		Height (approx)	
Place of birth		Weight (approx)	
National Insurance Number			
British driving licence no.	Car licence held since	PCV licence held since	
		Hours towards next DCPC	
Is your licence free from endorsements?	Yes	No	If 'no' list endorsements below

### Current Employment

Company name		Your start date	
Position held		Wage/salary rate	
Reason for leaving			
		Notice period	

### Previous Employment

Company name		Your start date	
Position held		Leaving date	
Reason for leaving			
		Wage/salary rate	
Company name		Your start date	
Position held		Leaving date	
Reason for leaving			
		Wage/salary rate	

An offer of employment may be subject to satisfactory written references. Please list the names and contact details of two referees below, one of which must be your present employer. Family members not acceptable.

Name			Name		
Position			Position		
Company			Company		
Address			Address		
Telephone			Telephone		
Can we approach referee before making an offer of employment?	Yes	No	Can we approach referee before making an offer of employment?	Yes	No

If you have answered 'No' to either of the above please give a reason.

\* optional information

### Your Health\*

Do you wear glasses?	Yes		No			Do you wear contact lenses?	Yes		No		
Have you ever suffered from an alcohol or drug problem							Yes		No		
Do you smoke cigarettes, cigars, a pipe or e-Cigarettes?							Yes		No		
Do you suffer from dermatitis or any other skin problem?							Yes		No		
How many days off work have you had through sickness or other absences excluding holidays in the last 12 months?											
Do you have any condition, injury or health problem that may affect your ability to perform the duties relating to the role you are applying for?							Yes		No		
Are you taking any medication which may affect your ability to satisfactorily carry out the role you are applying for?							Yes		No		
Do you have a health problem that may amount to a disability?							Yes		No		
If you have answered 'Yes' to any of the above questions please provide details below											

### Your interests (please give brief details below of any hobbies, sports or other activities you participate in

### Why would you like to work for lynx?

### In your view, what makes the ideal bus driver?

### Convictions and legal proceedings

Except for offences which are 'spent' under the terms of The Rehabilitation of Offenders Act 1974, please list any court convictions. Driving offences resulting in points must be included. Also any details of outstanding summons or prosecution or any attachment of earnings order made against you. Write 'None' if you have no convictions or outstanding summons. Making a false statement will disqualify you from employment, or if discovered after employment has commenced, will render you liable to instant dismissal. Please note that in the event of you being offered a position, a criminal record disclosure will be requested from the Disclosure and Barring Service. The possession of a valid Norfolk County Council DBS badge is a requirement of employment at Lynx. Please note that a criminal record does not necessarily mean your application for employment will not be successful.

Have you ever been convicted of a criminal offence?							Yes		No	
Date	Nature of offence	Sentence or court order								

### Declaration

All of the details given above is true and I understand that giving false or misleading information could result in rejection for potential employment or subsequent dismissal.

Signature	Print name	Date

Please post to: Coastal Red Ltd t/a Lynx. Acer Road, Saddlebow Industrial Estate, King's Lynn, Norfolk. PE34 3HN