

# NEWPORT PAGNELL SWIMMING CLUB

## Employment Application



APPLICANT INFORMATION									
Last Name			First Names			Date of Birth			
Street Address									
City		County			Post Code				
Phone			E-mail Address						
Date Available			National Insurance						
Position Applied for									
Are you a citizen of the United Kingdom?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the United Kingdom?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?					
EDUCATION									
School		Qualifications							
From		To							
College		Qualifications							
From		To							
University		Qualifications							
From		To							
REFERENCES									
<i>Please list three professional references.</i>									
Full Name			Relationship						
Company			Phone						
Address									
Full Name			Relationship						
Company			Phone						
Address									

**PREVIOUS EMPLOYMENT**

Company		Phone
Address		
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone
Address		
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone
Address		
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>		

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
-----------	------