



## APPRENTICESHIP APPLICATION/INTERVIEW FORM

**SECTION ONE – PERSONAL DETAILS**

SURNAME \_\_\_\_\_ FORENAME \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
POSTCODE \_\_\_\_\_

HOME PHONE No. \_\_\_\_\_ MOBILE \_\_\_\_\_

D.O.B. \_\_\_\_\_ NATIONALITY \_\_\_\_\_

NATIONAL INSURANCE NUMBER \_\_\_\_\_

J.I.B. GRADE \_\_\_\_\_ CARD EXPIRY DATE \_\_\_\_\_

NEXT OF KIN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

DRIVING LICENCE      YES/NO      NUMBER OF POINTS \_\_\_\_\_

PASSPORT              YES/NO      EXPIRY DATE \_\_\_\_\_

NUMBER \_\_\_\_\_

IF APPLICABLE

UK WORK PERMIT      YES/NO      EXPIRY DATE \_\_\_\_\_

REF. NUMBER \_\_\_\_\_

NOTES:

\_\_\_\_\_

**SECTION TWO - TRAINING/QUALIFICATIONS**

DID YOU SERVE AN APPRENTICESHIP                      YES/NO  
 WAS IT A JIB APPRENTICESHIP                      YES/NO

WITH WHICH COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ POSTCODE \_\_\_\_\_

START DATE \_\_\_\_\_ FINISH DATE \_\_\_\_\_

GCSE/A LEVEL AND ANY OTHER QUALIFICATIONS

<u>SUBJECT</u>	<u>SCHOOL/COLLEGE</u>	<u>PREDICTED GRADE</u>

PRACTICAL TRAINING

<u>TRAINING RECEIVED</u>	<u>TRAINING ORGANISATION</u>	<u>DATE</u>



**SECTION FIVE – DECLARATION**

AS YOUR EMPLOYMENT COULD ENTAIL TRAVELLING AWAY FROM HOME AND WORKING AT HEIGHT ON CONSTRUCTION SITES, PLEASE ANSWER THE FOLLOWING

ARE YOU WILLING TO LODGE AWAY FROM HOME YES/NO

ARE YOU WILLING TO WORK OUTSIDE NORMAL WORKING HOURS (NIGHTS/WEEKENDS) YES/NO

DO YOU HAVE ANY MEDICAL CONDITION THAT MAY RESTRICT YOUR ABILITY TO CARRY OUT THE WORK FOR THE POSITION YOU ARE APPLYING FOR YES/NO  
IF YES PLEASE GIVE DETAILS:-

ARE YOU ON ANY MEDICATION YES/NO  
IF YES PLEASE GIVE DETAILS:-

HAVE YOU BEEN CONVICTED OF ANY CRIMINAL OFFENCE YES/NO  
DO YOU HAVE ANY PENDING CONVICTIONS YES/NO  
IF YES PLEASE GIVE DETAILS

**SECTION SIX – DECLARATION**

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

REVIEWED BY \_\_\_\_\_ DATE \_\_\_\_\_