

Smart Systems Limited  
Arnolds Way, Yatton,  
North Somerset BS49 4QN  
Tel: 01934 876100 Fax: 01934 835169  
Email: hr@smartsystems.co.uk



## CONFIDENTIAL APPLICATION FOR EMPLOYMENT

This should be read in conjunction with our Job Applicant Privacy Notice

### 1. APPLICATION FOR

Position applied for or areas of interest

Available to take up employment (date)

Salary expectation

### 2. PREPARED TO WORK

Full-time  Part-time  Shift work

### 3. PERSONAL DETAILS

Name

Address

National Insurance  
Number

Telephone numbers

Mobile

Home

Email Address

Have a current  
driving licence?

Yes  No

Provisional  Full  HGV

Have you any current endorsements? (give details)

Yes  No

### 4. LANGUAGES

Do you speak or read a foreign language? (give details)

Yes  No

5. EDUCATION AND TRAINING		continue on a separate sheet if necessary
University, college, school or other place	Course studied and qualifications achieved	
From / To		
From / To		
From / To		
From / To		

6. OCCUPATIONAL QUALIFICATIONS	
Awarding body	Qualification/level

7. EMPLOYMENT	
<b>Present/last employer</b>	
From / To	
Address	
Job title	
Duties/responsibilities	
Reason for leaving	
Finishing pay	£      per week/month/annum

<b>Other most recent employer</b>	
From / To	
Address	
Job title	
Duties/responsibilities	
Reason for leaving	
Finishing pay	£      Per week/month/annum

<b>Other most recent employer</b>	
From / To	
Address	
Job title	
Duties/responsibilities	
Reason for leaving	
Finishing pay	£      Per week/month/annum

Have you ever worked for Smart Systems/ Smart Extrusions or any other part of the Corialis group	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes please advise position	
Reason for leaving	
Dates of employment	

<b>8. GENERAL</b>	
Interests/hobbies (Give details of pastimes, sports, etc)	
Have you ever been convicted of a criminal offence? (Declaration subject to the Rehabilitation of Offenders Act 1974)	Yes <input type="checkbox"/> No <input type="checkbox"/>

If offered this position will you continue to work in any other capacity?  
(Give details)

Yes  No

### 9. WORK PERMITS

Are there any restrictions to your residence in the UK that might affect your right to take up employment in the UK?

Yes  No

If you are successful in your application would you require a work permit to work in the UK?

Yes  No

### 10. PERSONAL REFEREES

#### Work reference - not members of your own family

Name

Address

Organisation

Occupation

Telephone number

#### Work, personal or educational

Name

Address

Organisation

Occupation

Telephone number

### 11. SIGNATURE

I confirm that, to the best of my knowledge, the information I have given on this form is correct.

Signature

Date

### HOW DID YOU FIND OUT ABOUT THIS VACANCY

Newspaper

Our Website

Job site

Word of mouth

Other

Please specify

## EQUAL OPPORTUNITIES MONITORING FORM

In accordance with Smart Systems Equal Opportunities Policy and our commitment to providing equal opportunities in employment, in order to assess how successful this policy is we have set up a system of monitoring all job applications. We would therefore be grateful if you would complete the questions on this form. We have asked for your name to enable us to monitor applications at shortlisting and appointment as well as application stage.

All information will be treated in confidence and will not be seen by staff directly involved in the appointment. The questionnaire will be detached from your application form, stored separately and used only to provide statistics for monitoring purposes. Thank you for your assistance.

<b>Post Title</b>	<input style="width: 100%;" type="text"/>		
<b>Full Name</b>	<input style="width: 100%;" type="text"/>		
<b>1. Gender</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>		
<b>2. Marital Status</b>	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Other <input type="checkbox"/>
<b>3. Age</b>	<input style="width: 100%;" type="text"/>		

<b>4. Do you have responsibility for dependants?</b> (Dependants relates to children, or elderly or other persons for whom you are the main carer.)	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>5. Do you have any disabilities?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>

<b>6. Ethnic origin (Relates to a sense of identity/belonging on the basis of race/culture).</b>	
<b>I would describe myself as (Please choose ONE section from A to E, and then tick the appropriate box to indicate your cultural background):</b>	
<b>A White:</b>	
British	<input type="checkbox"/>
English	<input type="checkbox"/>
Scottish	<input type="checkbox"/>
Welsh	<input type="checkbox"/>
Irish	<input type="checkbox"/>
Other, please specify	<input type="checkbox"/>

<b>B Mixed:</b>	
White and Black Caribbean	
White and Black African	
White and Asian	
Other, please specify	
<b>C Asian, Asian British, Asian English, Asian Scottish or Asian Welsh:</b>	
Indian	
Pakistani	
Bangladeshi	
Other, please specify:	
<b>D Black, Black British, Black English, Black Scottish, or Black Welsh:</b>	
Caribbean	
African	
Other, please specify:	
<b>E Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh, or other ethnic group:</b>	
Chinese	
Other, please specify:	

<b>7. Where did you see this post advertised?</b>	
<p>Data protection: Information from this application may be processed for purposes registered by the Employer under the General Data Protection Regulation (GDPR) and the Data Protection Act 2018. Individuals have, on written request the right of access to personal data held about them. A subject access request form (SAR) can be found on our website or is available from our HR Department.</p> <p>Please complete and return a copy of our Job Applicant Privacy Notice available on our website or from the HR Department to give your consent to Smart Systems processing the data supplied in this form for the purpose of recruitment and selection.</p>	
<b>Applicant's signature:</b>	<b>Date:</b>