	PTS-247 Ltd	d Job Application Form
Vacancy Title:		PTS-247 Driver
Please tell us hov	v you heard about this vacancy:	
1. Perso	nal details	
Last Name:		First Name:
Mobile No:		Home Contact No:
Email address:		
Address:		
Postcode:		
N.I. Number:		
Bank Details.		
Title. Sort.		
Account.	DATIENT TO	
Are you free to ren	main and take up employment in the Uk	ANSFER SERVICES
	ed to provide appropriate documentary <u>kba.homeoffice.gov.uk</u>	evidence of this at interview. For examples of acceptable documents
Driving Licence (if	relevant to post applied for)	
	clean driving licence valid in the UK?	Yes No
If no, please give	details:	
Convictions/ Disg	ualifications	
Upon offer of emp	loyment, we reserve the right to reque	st a Criminal Records Bureau Disclosure at enhanced level and this
aisclosure will incl	ude details of cautions, reprimands, or	πηαι warnings as well as convictions.

VR 2.1 – PTS-247 Application Form – 30/08/2024

Please provide details below of any convictions which are not spent under the terms of the Rehabilitation of Offenders Act 1974:

2. Education/Qualifications

School (11+)	Start Date	Qualification and Grade	Completion Date
College / University	Start Date	Qualification and Grade	Completion Date
P		S	
Ongoing Professional Development	Start Date	Qualification and Grade	Completion Date
24		SEER SERVICES	

Training and Development

Please use the space below to give details of any training or non-qualification-based development which is relevant to the post and supports your application.

Training Course	Course Details
	(including length of course/nature of training)

Current Membership of any Professional Body/Organisation

Please give details:

VR 2.1 – PTS-247 Application Form – 30/08/2024

Position Held:			
3. Employme	nt History		
Previous Employment: <u>a full work history with</u>			e (paid or unpaid), starting with the most recent first. <u>(We require</u>
Current or most recent	employer.		
Address:			
			Postcode:
Employment Dates:	Started:	Left:	Reason for Leaving:
Salary when left this			Notice Period:
post:			
Brief description of du	ties:		
	-27		
<u>Previous employer.</u>	6-		
Name of Employer:			
Address:			
	PATIE	NT TRAN	ISFER SERVICES
			Postcode:
Position Held:			
Employment Dates:	Started:	Left:	Reason for Leaving:
Salary when left this post:			Notice Period:
Brief description of du	ties:		
		VR 2.1 – PTS-247 App	lication Form – 30/08/2024 3

Explanation for any ga of more than 1 month the employment histo	s in					
Previous employer.						
Name of Employer:						
Address:						
			Postcode:			
Position Held:	1		Fostcode.			
Employment Dates:	Started:	Left:	Reason for Leaving:			
Salary when left this			Notice Period:			
post:						
Explanation for any ga of more than 1 month the employment histo Previous employer.	s in ry:	4/7				
rievious employei.	PATIE	NT TRAN	ISFER SERVICES	1		
Name of Employer:						
Address:						
			Postcode:			
Position Held:						
Employment Dates:	Started:	Left:	Reason for Leaving:			
Salary when left this post:			Notice Period:			
Brief description of du	ties:					
		VR 2.1 – PTS-247 Appl	lication Form – 30/08/2024 4			

Explanation for any gaps of more than 1 months in the employment history:

4. References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your referees are.

Reference 1	Reference 2			
Name:	Name:			
Job Title:	Job Title:			
Organisation:	Organisation:			
Address:	Address:			
Contact No: Email:	Contact No: Email:			
How is this person known to you:	How is this person known to you:			
Do you wish to be consulted before this referee is approached:	Do you wish to be consulted before this referee is approached:			
Yes 🔲 No 🗌	Yes No			

We reserve the right to contact any of your other previous employers within the last three years.

5. Declaration

Statement to be Signed by the Applicant (Candidates selected for interview will normally be notified within four weeks of the closing date.)

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered:

I agree that PTS-247 Ltd can create and maintain computer and paper records of my personal data and that this will be processed and stored in accordance with the Data Protection Act 1998.

I confirm that all the information given by me on this form is correct and accurate and I understand that if any of the information I have provided is later found to be false or misleading, any offer of employment may be withdrawn or employment terminated.

PTS-247 Ltd reserves the right to verify any of the data supplied in your application.

VR 2.1 – PTS-247 Application Form – 30/08/2024

Signature			Date				
				I			
If you return this form by emai 6. Availability	l, you will be asked t	o sign your application at interview.					
Any planned holiday da	ates:	From:	То:				
		From:	То:				
		From:	То:				
Shifts preferred: (please	number in ord	der of preference)					
		Day (usually 5.30am – 5.30pm):					
		Evening (usually 6.00pm – 10.00	om):				
		Saturday (usually 9.00am – 5.30p	om):				
		Sunday (usually 10.00am – 4.00pm):					
Minimum notice need	ed to work:		V				
Expected Start Date							
Do you have any legal	restriction on	hours you can work? Yes	No 🗌				
If yes, then please prov	<i>v</i> ide details:	NT TRANSFER	SERVICES				
		Strictly confident	ial				

7. Equal Opportunities Monitoring

We have a legal duty to promote equality. This applies to everything we do both as an employer and provider of services. We also have a duty to ensure that minority groups are not excluded from our recruitment process. We

want to make sure that our equal opportunities policy is working and also find out how well our recruitment process works. To help us with this we need to ask you a few questions.

Please note: The shortlisting and interview panel will not see any of this information as it is used for monitoring purposes only.

What is you gender?	Male 🗌	Female		
What is your age group?				
16-24 25-39	40-49	50-64 🗌	65+ 🗌	
Ethnic origin				
A. White (i) White British (ii) While Irish (iii) Any other White background		(ii) Black Afric (iii) Asian & W	bbean & White an <mark>&</mark> White	
C. Asian or Asian British (i) Indian (ii) Pakistani (iii) Bangladeshi (iv) Kashmiri (v) Chinese (vi) Any Other Asian Background	D. Black or Black British (i) African (ii) Caribbean (iii) Any Other Black Background			
E. Gypsy/Traveller (i) Gypsy/Roma (ii) Irish Traveller (iii) Any Other Gypsy/Traveller Background		F. Other (i) Any Other	RVICES Ethnic Backgroun	nd 🗌
Religion/Belief:				
Buddhism	Christianity		Islam	
Humanism	Islam		Judaism	
Sikhism	Other		None	
N	/R 2.1 – PTS-247 Ap	plication Form – 30/08/202 7	4	

Sexual Orientation							
Heterosexual		Bisexual			LGBTQ		
Prefer not to say							
Disability							
Are you disabled or do illness or condition?	o you have	a long-term limiti	ng	Yes		No 🗌	
If 'yes', please indicate	which best	describes your disa	ability/cond	lition.		X	
Physical or mobility imp	airment					\wedge	
Learning disability/diffic	culty or cogr	iitive impairment					
Sensory impairment							
Longstanding illness or l	health cond	ition					
Mental Health Condition							
Other					V		
					1	V	
Are you a carer?				Yes		No 🗌	
A carer is someone who l illness. The carer may or							or long-ter
Religion/Belief							
Buddhism	Chris	tianity 🗌 🛛 Hii	nduism 🛛				
Humanism	Islam		daism 🗌				
Sikhism	Othe	r 🗆 No	one 🗆				
Sexual Orientation							
		VR 2.1 – PTS-247 Ap	plication Forr 8	n – 30/08/20	24		

Heterosexual Bisexual Lesbian/Gay Prefernot to say
Are you disabled or do you have a long-term limiting illness or condition?
Yes No
If 'yes' please indicate which best describes your disability/condition
Physical or mobility impairment
Learning disability/difficulty or cognitive impairment Sensory Impairment Long standing illness or health condition Mental Health condition
Other Content of the second se
A carer is someone who looks after a partner, relative or friend who is an older person, or has a disability or long-
term illness. The carer may or may not live in the same household. Yes No
VR 2.1 – PTS-247 Application Form – 30/08/2024 9