



CASTLE | BRIMSMORE | POUNDBURY

Application for Employment

CASTLE GARDENS
New Road | Sherborne
Dorset | DT9 5NR
Tel: 01935 814633

BRIMSMORE GARDENS
Tintinhull Road | Yeovil
Somerset | BA21 3NU
Tel: 01935 411000

POUNDBURY GARDENS
Peverell Avenue | Poundbury
Dorchester | Dorset | DT1 3RT
Tel: 01305 257250

Application for Employment

If you feel you may have difficulty completing this form please ask to speak to one of the centre managers who will help you.

Personal Details:

Date:

First Name(s):

Surname:

Title:

Present Address:

Home Tel:

Mobile Tel:

Email:

If you have moved in the last 5 years please give previous address:

National Insurance Number: / / / /

If you do not have a National Insurance Number do you have the right to work in the UK?: YES / NO (Please delete)

At interview you will be required to provide documentary proof of your National Insurance Number or your right to work in the UK.

Detail of Job applied for:

Preferred Centre:	Castle Gardens		Brimsmore Gardens		Poundbury Gardens	
-------------------	----------------	--	-------------------	--	-------------------	--

Position applied for:

Please tick which days you are available for work:

Mon		Tues		Weds		Thurs		Fri		Sat		Sun	
-----	--	------	--	------	--	-------	--	-----	--	-----	--	-----	--

Please state which hours you are available to work:

Please note: The majority of positions within the business will require some weekend work on a rota basis.

Education

Please list details and results of any qualifications taken:

--	--	--

If you have any other special skills, activities, hobbies or training which you feel may be relevant to your application please list them below:

--

Employment History

Present Employer:

Address:

Job title & Duties:

Rate of Pay:

Dates Employed:

From:

/ /

To:

/ /

Reasons for leaving:

Please tell us about your previous work experience and about the skills you used and/or learned in those jobs:

1:

2:

3:

4:

5:

What do you think you would enjoy most about working within The Gardens Group?:

What do you think you would enjoy least about working within The Gardens Group?:

Please tell us who you think gives you the best customer service when you shop with them and what is it that you particularly like:

Please tell us about your favourite shop and why you like it:

Please answer each of the following questions with either: Yes, No or Unsure

i) Do you find it difficult to start conversations?

ii) Do you enjoy answering people's questions?

iii) Do you find it difficult to talk on the telephone?

iv) Do you like to carry out the same tasks each day?

v) Do you like to have different things to do each day?

vi) Do you prefer to see stock displayed neatly and orderly in nice straight lines?

vii) Do you like to see stock displayed in a way that inspires you to be creative at home?

Other Information

Do you have a clean driving licence?:

YES / NO

Have you ever been convicted of a criminal offence, which is not 'spent' under the Rehabilitation of Offenders Act?

YES / NO

References

1. Previous Employer	2. Previous Employer	3. Your Choice
Name:	Name:	Name:
Address:	Company Address:	Address:
Daytime Tel:	Daytime Tel:	Daytime Tel:
How long known:	How long known:	How long known:

Please complete all three references. Personal references must not be related to you.

Health

If you have a disability please give details of any special arrangements that you would require:

Please tell us about any medical condition you have?:

Please state how many days you have been away from work due to a medical condition in the past 5 years:

Declaration

- I confirm that the information given on this Application Form is correct to the best of my knowledge.
Any false information may result in instant dismissal.
- I understand that any engagement entered into is subject to a probationary period, satisfactory references, documentary evidence of either my National Insurance number or my right to work in the UK and if necessary, a medical examination.
- I agree that you may retain my details on file for a period of six months.

Signature:

Date:

Please return completed form to: **HR Department**, The Gardens Group
Castle Gardens, New Road, Sherborne, Dorset, DT9 5NR