



Community Interest Company No. 6735733, Patron: Dr. Liam Fox MP
www.strawberrylinecafe.co.uk info@strawberrylinecafe.co.uk

JOB APPLICATION FORM

Post applied for:

Name of Applicant

Address

Telephone Home

Work

Are you happy for us to call you there? Yes / No

Name and address of present / last employer

Current job description including details of main duties

Salary and hours worked

Length of service

Notice period required

Reason for leaving

Previous relevant work experience (voluntary work included)

Relevant educational qualifications

Relevant courses attended

What personal qualities and professional skills would you be able to bring to the job?

Please give details of any serious illness or disabilities

Number of days absence due to sickness in the last 12 months

Please give details of any criminal convictions

Please provide names and addresses of 2 referees

Name	Name
Address	Address
Telephone	Telephone
Qualification	Qualification

I am prepared to undergo a medical examination if required, and confirm that to the best of my knowledge and belief there are no medical reasons which could prevent me from undertaking the post for which I am applying.

I am prepared to undergo CRB checks and understand that any job offer is conditional on such checks being satisfactory.

The information on this form is correct and I understand that an appointment if offered would be subject to that information being correct.

I understand that all of the cafe's premises are "No smoking" areas and that if I accept a position with the cafe I will abide by that policy.

Signed.....

Dated.....

Please return this completed form to:
The Directors, ref: CMP, 33 Court Avenue, Yatton, Bristol, BS49 4EP