

JOB APPLICATION FORM
(NOT FOR USE IN THE USA)

Please complete this document in your own handwriting by printing clearly in BLACK or BLUE ink.
Once complete please return in the envelope provided along with your CV and covering letter.

Position applied for:	Reference Number:
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Surname:	Forenames:
Title:	Home Telephone Number:
Address:	Mobile Telephone Number:
Postcode:	Do you intend to relocate to the area if your application is successful? YES/NO.
Nationality:	
National Insurance Number:	How will you travel to work? Please estimate how long a one-way journey will take.

Please note, to enable us to comply with our obligations under the Asylum and Immigration Act, you will be asked to provide written proof of your right to work in the United Kingdom, before any job offer is made to you. You will be given details of the original document or documents which are required at the appropriate time.

Do you have a full current driving licence? YES/NO Is it free of endorsements? YES/NO If No, please supply details.
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Have you ever been convicted of a criminal offence, other than a spent conviction, under the Rehabilitation of Offenders Act 1974? YES/NO

Do you smoke?

EMPLOYMENT

Have you previously applied to work for us? YES/NO. If yes, when and in what capacity?

How did you hear of this vacancy?

Have you a contact, or are you related to, any person in the employ of Tepnel Life Sciences Plc? If so, please give details:

If offered this position, will you continue to work in any other capacity? YES/NO. If yes, please give details.

Would you work full time? YES/NO If your application is for part-time employment, please state days/hours preferred.

On what date would you be available to commence this employment? (If already employed, please state current notice period).

How many days unauthorised absence have you taken over the last two years:

Number of occasions:

Details:

Please outline the skills and experience you have gained through paid employment and other work activities and interests which are relevant to your application for this job.

EMPLOYMENT HISTORY

Present/Last Employer: Address:	Starting Salary: Final Salary:
Type of Business:	Position Held:
Describe the work undertaken:	
Reason for Leaving:	

<i>If applicable, please give details of your two previous employers, most recent first:</i> Employer: Address:	Starting Salary: Final Salary:
Type of Business:	Position Held:
Describe the work undertaken:	
Reason for Leaving:	

Employer: Address:	Starting Salary: Final Salary:
Type of Business:	Position Held:
Describe the work undertaken:	
Reason for Leaving:	

REFERENCES

Please give details of two referees (one of whom should be your present/last employer and not relatives). Contact will only be made with your authority.

Name:
Occupation:
Address:
Telephone:

Name:
Occupation:
Address:
Telephone:

Do you consider yourself to have a disability? YES/NO

If yes, please give details:

How can we assist with any special needs to enable you to carry out your duties?

If your application is successful, you may be asked to consent to Tepnel Life Sciences Plc verifying the information you have given in this form.

Sign and date the declarations and authorisation below:

I declare that the information given by me, to the best of my knowledge, is true and complete.

I acknowledge that dishonesty or the giving of incorrect information on purpose may render this application and any subsequent employment invalid and subject to summary termination.

In accordance with the Data Protection Act 1998, I hereby authorise Tepnel Life Sciences Plc to process the information contained in this application form for recruitment and selection purposes.

Name: BLOCK CAPITALS

Signed:

Date: