



Application Form

Personal Details

Surname:		First Name (s):	
Address:			
	Postcode:		
Home Tel:		Mobile:	
Email:			
National Insurance Number:			
Do you need a work permit to work in the UK?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Driver Details

Do you have a driving license?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If Yes, What kind of license?	Full UK	<input type="checkbox"/>	Other	<input type="checkbox"/>
If other, please provide details:				
Driving License number:				
If HGV:	Class 1	<input type="checkbox"/>	Class 2	<input type="checkbox"/>
Do you have a digital tachograph driver card?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Card No.			
Do you hold a current CPC?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Renewal date:				
Do you hold any additional qualifications? (e.g. ADR, Forklift)				
Do you have your own transport?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you ever been disqualified from driving?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Details:			
Do you have any current endorsements?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Details:			
Have you had any accidents in the last 3 years?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Details:			

Please provide details below if you have been convicted of a criminal offence or been the subject of a conditional discharge or probation order.

Ref:	Written By	Authorised by:	Issue No:	Issue Date	Reason for change	Page No:
AF	Chloe D-J	Katherine Prigmore	2	30/01/2020	Document Control	1

Previous Employment			
(Please include details of your most recent employment first, then work backwards)			
Employer:		Job Title:	
Address:		Start Date:	
		End Date:	
		Tel:	
		Email:	
Reason for leaving:			
Use as Reference?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Employer:		Job Title:	
Address:		Start Date:	
		End Date:	
		Tel:	
		Email:	
Reason for leaving:			
Use as Reference?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Employer:		Job Title:	
Address:		Start Date:	
		End Date:	
		Tel:	
		Email:	
Reason for leaving:			

References			
Please provide any additional references as required:			
Name:		Company:	
Address:			
Tel:		Email:	
Relationship:			
Name:		Company:	
Address:			
Tel:		Email:	
Relationship:			

Ref:	Written By	Authorised by:	Issue No:	Issue Date	Reason for change	Page No:
AF	Chloe D-J	Katherine Prigmore	2	30/01/2020	Document Control	2

I declare that the information I have given on this form is, to the best of my knowledge, true and complete. I understand that if it is subsequently discovered any statement is false or misleading, or that I have withheld relevant information, my application may be disqualified or, if I have already been appointed, I may be dismissed. I hereby give my consent to the company processing the data supplied on this application form for the purpose of recruitment and selection.

Signed		Date	
--------	--	------	--

Prigmore Haulage Ltd undertakes that it will treat any personal information that you provide to us, or that we obtain from you, in accordance with the requirements of the Data Protection Act 1998. After initial assessment, Prigmore Haulage Ltd may keep your details on file pending suitable opportunities that may arise in the future.

Please tick if you do not wish us to hold your details

Ref:	Written By	Authorised by:	Issue No:	Issue Date	Reason for change	Page No:
AF	Chloe D-J	Katherine Prigmore	2	30/01/2020	Document Control	3