



LIFELINE

MEDICAL TRANSPORT SERVICE LTD

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APPLICATION FOR APPOINTMENT.

Mr / Mrs / Ms	FIRST NAME/S	SURNAME	
ADDRESS :		RELIGION :	FULL TIME / PART TIME / CASUAL
POST CODE :		DATE OF BIRTH :	PLACE OF BIRTH :
TIME AT THIS ADDRESS :		MARITAL STATUS : MARRIED / SINGLE / DIVORCED / SEPARATED	
Previous Address (if less than five years) (Including the post codes):		PHONE DAY :	PHONE NIGHT:
NATIONAL INSURANCE NUMBER :		SMOKER: YES/NO	MOBILE PHONE :
PASSPORT NUMBER :		DRIVING / LICENCE DETAILS	
EXPIRY DATE :		LICENCE NUMBER :	
		DATE OF ISSUE:	
		NUMBER OF YEARS DRIVING EXPERIENCE?	
		VEHICLE CLASSES ABLE TO DRIVE :	
		HAVE YOU EVER HAD POINTS ON YOUR LICENCE? YES / NO	
		IF SO WHAT FOR?	
		ARE THERE ANY OUTSTANDING OR PENDING CONVICTIONS?	
		IF SO WHAT FOR?	

ADDITIONAL DRIVING STANDARDS (IAM ; ROSPA. ETC) PLEASE DETAIL:

EDUCATION. (Please list ALL formal education, from the age of 11.)

<u>FROM</u>	<u>TO</u>	<u>SCHOOL : COLLEGE : UNIVERSITY</u>	<u>COURSES ATTENDED : EXAM RESULTS</u>

EDUCATION. (ADDITIONAL INFORMATION) COURSES ATTENDED, GRADES, STANDARDS, AND

<u>FROM</u>	<u>TO</u>	<u>PLACE OF LEARNING</u>	<u>COURSES ATTENDED : RESULTS</u>

CONFIDENTIAL : APPLICATION FOR APPOINTMENT.

EMPLOYMENT DETAILS

Starting with your present / last job, please give details of your employment record. If you are currently employed, may we write to your employer for a reference? Yes / No

<u>FROM</u>	<u>TO</u>	<u>EMPLOYER AND ADDRESS</u>	<u>POSITION HELD AND DUTIES</u>
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<u>REASON FOR LEAVING</u>			
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<u>FROM</u>	<u>TO</u>	<u>EMPLOYER AND ADDRESS</u>	<u>POSITION HELD AND DUTIES</u>
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<u>REASON FOR LEAVING</u>			
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<u>REASON FOR LEAVING</u>			
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CONFIDENTIAL : APPLICATION FOR APPOINTMENT.

APART FROM YOUR GOOD LOCAL KNOWLEDGE, WHAT OTHER BENEFITS, DO YOU FEEL YOU HAVE TO OFFER TO LIFELINE?

SOCIAL ACTIVITY: Hobbies : Interests etc.

ANY ADDITIONAL INFORMATION THAT YOU WOULD LIKE TO TELL US ABOUT? (If the list of applicants is down to 2. Please tell me why you should get the job?)

FIRST AID, CERTIFICATION AND EXPERIENCE?

WORK REFERENCE

WORK REFERENCE

CHARACTER REFERENCE

CHARACTER REFERENCE

I,, confirm that all of the information declared in this application for employment, is true. I have not altered the truth, to enhance the prospect of employment.

I further declare that LIFELINE Medical Transport Service, can take up any reference that they see fit, to confirm any of the statements that I have made, within this application for Employment.

SIGNED DATE

PRINT NAME

OFFICE USE ONLY

DATE INT:	REF: WORK	Y/N	Y/N
START Y/N	REF: CHAR	Y/N	Y/N
INT.BEC.	ON TRK.		
WGE:	HPY: Y/N		
1st WARN:		2nd WARN:	
		C.T TERM	