

<b>Position applied for:</b> _____	<b>Date:</b> _____
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Surname \_\_\_\_\_

First Name \_\_\_\_\_

Preferred Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

Sex (please tick)      M     F

Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Postcode \_\_\_\_\_

Email address \_\_\_\_\_

Daytime telephone number \_\_\_\_\_

Evening telephone number \_\_\_\_\_

Mobile telephone number \_\_\_\_\_

Date of Birth \_\_\_\_\_

To help us process your application quickly, please tell us your national insurance number:

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**Your Application**

Do you require a work permit?      Y     N       If so, do you have a current, valid work permit?      Y     N

**Hours & Days you would like to work**

Please indicate the maximum number of hours you would like to work each week \_\_\_\_\_

How would you travel to work? \_\_\_\_\_

Please answer briefly the following questions:

Have you previously worked for Real Foods Ltd?      Y     N       How long do you intend staying at Real Foods? \_\_\_\_\_

Why would you like to work at Real Foods?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What do you see yourself achieving while you are working for Real Foods?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Relevant Experience**

Do you have any specific knowledge in any of the following areas:      If 'Yes' please give brief details:

Retail      Y     N       \_\_\_\_\_

Holistic      Y     N       \_\_\_\_\_

Nutritional      Y     N       \_\_\_\_\_

Have you been trained to sell alcohol under the Licensing (Scotland) Act 2005      Y     N       \_\_\_\_\_

Do you hold a valid certificate for this training      Y     N       \_\_\_\_\_

**Vehicle Licences**

Do you have a drivers licence?

Y  N

Any points

date received \_\_/\_\_/\_\_

no. of points \_\_\_\_\_

### Further Education

Name of Establishment	Subjects studied	Qualification	Date obtained

### Your Work Experience

Dates from	to	Full company name and address	Job title	Reason for leaving

### Your Referees

Please indicate two referees who might be able to tell us more about you. One of these should ideally be your most recent employer or head teacher/tutor. The other should be someone who knows you but is not a friend or relative.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you:

1. Been convicted of a criminal offence?

Y  N

2. Any prosecutions pending?

Y  N

If yes to either question, please give details:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Thank you for completing this form - we wish you well with your application. Before signing it, please be sure to read through carefully what you have written and ensure that you have filled in all the sections. Your signature will be taken as:

- 1.) Acknowledgement that all the information you have provided is complete, correct and not misleading.
- 2.) Your understanding that any offer of employment is subject to receipt of satisfactory references and your permission for us to approach your referees and previous employer to obtain references.
- 3.) Confirmation that you agree that your personal details can be held, and processed by Real Foods Ltd in accordance with the Data Protection Act 1998

Please return completed form to:

**Real Foods Ltd**  
**37 Broughton Street**  
**Edinburgh**  
**EH1 3JU**

**Tel: 0131 557 1911**

**Fax: 0131 558 3530**

Signed

Date