

#### APPLICATION FOR EMPLOYMENT

Thank you for applying for a position at Matalan. Your details will be treated in the strictest confidence. In order for your application to be processed, please complete all sections using BLOCK CAPITALS.

All candidates invited for an interview will be asked to produce proof of eligibility to work in the UK, failure to do so will lead to your application being declined.

|  |  |
| --- | --- |
| **POSITION APPLIED FOR:** General Sales Assistant | **STORE:** |

**Where did you hear about the vacancy? (Please tick appropriate box)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Job Centre |  | Facebook |  | Twitter |  | Flyer |  |
| Matalan website |  | In Store Poster |  | Friend / Family |  | Other |  |

## Personal Details

|  |  |  |
| --- | --- | --- |
| **FIRST NAMES:** | **SURNAME:** | |
| **TELEPHONE NUMBER:**  **MOBILE NUMBER:** | **E-MAIL ADDRESS:** |
| **FULL POSTAL ADDRESS:**  **POSTCODE:** | |

|  |  |
| --- | --- |
| **Expected salary/rate of pay:** |  |
| **National Insurance Number:** |  |
| **Are there any restrictions to your residence in the UK that might affect your right to take up employment in the UK?** YES / NO  If yes, please provide details.  **If you were successful in your application, would you require a work permit prior to taking up employment?** YES/NO | |

## Employment History – Please detail your current and previous job history and give an explanation for any gaps in employment.

|  |  |  |
| --- | --- | --- |
| **NAME & ADDRESS OF EMPLOYER (*most recent employer first*)** | **JOB TITLE /**  **MAIN RESPONSIBILITIES** | **REASON FOR LEAVING /**  **WANTING TO LEAVE** |
|  |  |  |
|  |  |  |

**Education / Training (or further experience)**

|  |  |
| --- | --- |
| **Achievement** | **Results** |
|  |  |
|  |  |

## Your Skills & Experience

|  |
| --- |
| In support of your application, please detail any relevant skills, experience or personal qualities which you believe are relevant to the position you are applying for within Matalan. |

**Availability**

Matalan operates between 6am and midnight 7 days a week. In order to match your availability to any existing vacancies, please indicate your maximum overall availability throughout the whole of the week.

|  |  |  |
| --- | --- | --- |
| **Monday** | Earliest Start Time | Latest Finish Time |
| **Tuesday** | Earliest Start Time | Latest Finish Time |
| **Wednesday** | Earliest Start Time | Latest Finish Time |
| **Thursday** | Earliest Start Time | Latest Finish Time |
| **Friday** | Earliest Start Time | Latest Finish Time |
| **Saturday** | Earliest Start Time | Latest Finish Time |
| **Sunday** | Earliest Start Time | Latest Finish Time |

**Disability Discrimination Act**

In accordance with the Disability Discrimination Act 1995 and good practice we are committed to providing people with disabilities an opportunity to compete fairly for jobs and to consider what adjustments might need to be made to enable them to carry out their job related activities. We are committed to fair selection practice, and in order to support you please answer the following questions.

Do you consider yourself to have a disability? The Disability Discrimination Act 1995 defines disability as “A physical or mental impairment which has a substantial and long term effect on a person’s ability to carry out normal day to day activities” YES / NO

If no, are there any other issues with regards to your health that you feel the company need to be made aware of? **YES/ NO**

Please give details:

If yes, would we need to make any adjustments in order to enable you to attend for interview?

YES / NO

If yes, please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If offered employment, would we need to make any adjustments to enable you to undertake your role? YES / NO

If yes, please give details:

Are there any other issues with regards to your health that you feel the company need to be made aware of? **YES/ NO**

If yes, please give details:

## Reference Details

References will only be requested upon offer of employment. If you are in employment, one reference must be of that organisation. Other references should include either previous employers or educational institutions.

|  |  |
| --- | --- |
| **NAME:** | **NAME:** |
| **ADDRESS:** | **ADDRESS:** |
|  |  |
|  |  |
|  |  |
| **POSTCODE** | **POSTCODE:** |
| **TELEPHONE NUMBER** | **TELEPHONE NUMBER:** |
| **RELATIONSHIP TO YOU:** | **RELATIONSHIP TO YOU:** |

**EMERGENCY CONTACTS: Please give details of the person who can be contacted in the event of an emergency**

|  |  |
| --- | --- |
| **Name:** | **Relationship:** |
| **Address:** | **Telephone number:**  **(Daytime)**  **Telephone number:**  **(Evening)**  **(MOBILE)** |

|  |
| --- |
| **REHABILITATION OF OFFENDERS ACT 1974**  You are not required to disclose convictions that are “spent”. Please note that “unspent” cautions or convictions will not necessarily disqualify you from the post.  **Do you have any unspent cautions or convictions? YES / NO**  Please list below details of any unspent cautions or convictions against you giving date, type of offence, sentence/fine imposed etc |

**Please note: At the expense of the Company, you may be required to apply for a ‘Police Subject Access report‘, undergo a medical examination or agree to the provision of a General Medical Practitioner’s report.**

## Declaration

I declare that the information I have given in this application is accurate and true. I understand that providing misleading or false information will disqualify me from appointment or, if appointed, may result in my dismissal.

I understand that any appointment or offer of appointment is conditional upon the receipt of satisfactory references.

I also understand that in some circumstances any appointment or offer of appointment may be conditional upon receipt of a satisfactory medical and / or police report.

**SIGNED ……………………………………………………………………………………… DATE …………………………**

**FOR ALL SALES ASSISTANT APPLICATIONS, PLEASE RETURN TO YOUR NEAREST STORE**

**Data Protection.**

The Data Protection Act 1998 (“The Act”) sets out certain requirements for the protection of your personal information against unauthorized use of disclosure. The Act gives you certain rights.

Except to the extent we are required or permitted by law, the information which you provide in this application form, and any other information obtained or provided during the course of you application (“the information”) will be used solely for the purpose of assessing your application.

If your application is unsuccessful or you choose not to accept any offer of employment we make, the information will not be held for longer than necessary, after which time it will be destroyed, although relevant information will be retained in the longer term to facilitate our Equal Opportunities Monitoring.

If your application is successful, the information will form part of your Personnel file and we will be entitled to process it for all purposes in connection with your employment. So that we may use the information for the above purposes and on the above terms, we are required under the Act to obtain your explicit consent.

I consent to the use of my personal information for the purpose and on terms set out above.

Signed……………………………………………………………………………………………………….. Date…………………………………

## OUR COMMITMENT TO EQUAL OPPORTUNITIES

This section of the application form will be detached from your application and will be used solely for monitoring purposes

Matalan is committed to its Equal Opportunity Policy and assesses all job applicants without regard to disability, race, gender, age, sexual orientation, religion or belief.

To enable the Company to adhere to this policy this application form includes questions relating to these topic and are non-obligatory. This information shall be kept separate to your application.

###### AGE

###### Please tick as appropriate

|  |  |  |
| --- | --- | --- |
| Are you Aged 16 or over as of 1st July | YES: | NO: |
| Date Of Birth: |  | |

**GENDER -**Please specify

*Please tick as appropriate*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you? | **MALE** |  | **FEMALE** |  |

**ETHNIC ORIGIN**

*Please tick the box which best describes your ethnic origin:*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| White |  | Black/Caribbean |  | Black/African |  | Black/Other |  | Other (please specify) |
| Indian |  | Pakistani |  | Bangladeshi |  | Chinese |  |  |

|  |  |
| --- | --- |
| **If you wish, you may disclose information about yourself in this section about the following:** | |
| Religion | Sexual Orientation |