



**Job Application Form**

This document is classified as confidential

The information provided on this document will be kept entirely confidential in accordance with the requirements of the General Data Protection Regulations 2016.

<b>Full Name:</b>	
<b>Full Address: (Including postcode)</b>	
<b>Mobile Phone Number:</b>	<b>Evening Phone Number:</b>
<b>E-mail address:</b>	
<b>National Insurance Number:</b>	

**N.B. Prior to starting work with BDB, we will need to see your original passport, full birth or adoption certificate, or an original Home Office endorsed document proving that you have the right to live and work in the UK.**

Please respond by ticking the boxes and providing details where applicable:	Yes	No
Would you be willing to work abroad?		
Do you hold a current Driving Licence?		
Do you have any driving endorsements? <span style="color: red;">If yes, please give details:</span>		

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**Position Applied For: (tick box)**

<b>Site Manager</b> <input type="checkbox"/>	<b>Labourer</b> <input type="checkbox"/>
<b>Site Supervisor</b> <input type="checkbox"/>	<b>Machine Operator</b> <input type="checkbox"/>
<b>Charge Hand</b> <input type="checkbox"/>	<b>Fabrication Operative</b> <input type="checkbox"/>
<b>Top Burner</b> <input type="checkbox"/>	<b>Fitter</b> <input type="checkbox"/>
<b>Burner</b> <input type="checkbox"/>	
<b>Other</b> _____	

**Education**

School/Further Education College	Qualifications Gained



**Training**

Have you received training on the following? Please give dates of training and provide a copy of all expired and current certificates as proof of training undertaken.

Training Programme	Tick	Training Programme	Tick
Passport to Safety		Asbestos Awareness / CAT B	
CCDO Labourer		Demo Site Safety Awareness	
CCDO Demo & Refurb Operative		Face Fit Test	
CCDO Topman		Access Platform	
CCDO Chargehand		Fork Lift Truck	
CCDO Supervisor		First Aid at Work – 3 day	
CCDO Site Manager		Emergency First Aid – 1 day	
Abrasive Wheels		Fire Safety Awareness	
Risk Assessment		Power/Jet Washing	
Breathing Equipment		Confined Spaces	
Appointed Person		ADR Training	
Lift Supervisor		Portable Scaffolding	
Slinging / Signalling		Resuscitation Training	
Excavator/Demo Plant Operator		Safety Hot Work	
Specify Plant Operator Categories held:		Other Training:	

**Employment History**

Please give details of your work history. Continue on a separate sheet if necessary, or supply full detailed Curriculum Vitae.

Name of Employer	Brief details of duties	Reason for leaving



Please give full details of 2 employer referees, including telephone number:

Please ensure you have obtained the full permission of the referee prior to giving us their personal information

Tel:	Tel:
Do you know, or are you related to, anyone who works for BDB? If so, please provide details:	

**Privacy Notice:**

The information that you have provided above will be used solely to assess your job application within the company. We will not use the information contained within the form for any other purpose nor shall we pass the information on to any third party.

Should you be successful and be offered employment at the company, we may also use the information contained within the form for health, safety & administrative purposes. The form will be kept secure within a locked cabinet at all times.

Should you be unsuccessful, we may wish to store this job application form at our office in a locked cabinet. We may contact you in the future, should further job opportunities arise at the company.

Yes, I will allow this job application form to be stored securely & be contacted in the future

No, I do not want this job application form to be stored. Please destroy.

**Declaration:** To the best of my knowledge, all the above details are correct.

Signed.....

Print Name.....

Date.....

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