

INDIVIDUAL RESTAURANTS

WORKING WITH US

Individual Restaurants is a collection of restaurants as individual as you are.

Please fill in the form, print off, sign and send to the address on the back page.

Position applied for:	
Brand:	
Title:	Address:
Surname:	
First names:	
Contact Number:	
Email address:	
Date of birth:	Postcode:
Marital status:	No of dependents & ages:
Nationality:	Birth place:
National insurance number:	

FOR NON-BRITISH & NON-EC NATIONALS

Date of entry into the UK:	How long do you intend to stay in the UK?
Do you have a work permit?	If Yes, what type and number?

Are you registered as a disabled person? YES <input type="checkbox"/> NO <input type="checkbox"/>	If Yes, enter your registered disabled No°:
Please list any details of illnesses or disabilities:	
Number of days off work due to illness in the last 2 years:	
Do you hold a current driving license? YES <input type="checkbox"/> NO <input type="checkbox"/>	Any endorsements held?
Have you ever been convicted of a criminal offence that is not spent as defined in the Rehabilitation of Offenders Act 1974?	
YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, please give details:	

EDUCATION AND QUALIFICATIONS

Secondary education	From - To	Examinations and grades
Further education	From - To	Examinations and grades
Professional qualifications or certificates:		
Languages and specialised skills:		

EMPLOYMENT HISTORY - PRESENT OR MOST RECENT EMPLOYER FIRST

Name, Address Telephone Number	Position, Job Title and Responsibilities	From - To	Salary	Reason for leaving

Have you given notice to your present employer? YES NO

How soon could your employment begin?

Please detail any holiday commitments in the next 12 months:

REFERENCES: DELETE INFORMATION WHICH IS NOT APPLICABLE. (No information will be sought from your present employer without your consent)

Name:	Name:	FOR OFFICE USE ONLY	
Address:	Address:	Reference 1:	Checked by:
			Passed? YES <input type="checkbox"/> NO <input type="checkbox"/>
Tel:	Tel:	Reference 2:	Checked by:
School / College / Employer / Character	School / College / Employer / Character		Passed? YES <input type="checkbox"/> NO <input type="checkbox"/>

ADDITIONAL PERSONAL DETAILS

Applicants are requested to tick the boxes below to enable the company to monitor its equal opportunity policy. Monitoring is recommended by the Codes of Practice for the elimination of racial discrimination and for the elimination of discrimination on the grounds of sex and marital status. This is used for no other purpose and will be treated as confidential.

ETHNIC ORIGIN

To assist us in monitoring our Equal Opportunities policy we would ask you to tick as appropriate:

White European White Other Black Caribbean Black African
 Black Other Indian Pakistani Bangladeshi
 Chinese Other Not Known

RECRUITMENT POLICY

It is the company's policy to employ the best qualified personnel and provide equal opportunity for the relevant advancement of employees including promotion and training and to not discriminate any person because of race, colour, national origin, sex or marital status.

Signature:

Date:

DECLARATION

I understand that the completion of this form does not guarantee employment. I certify that all the information given on this form is true and accept that any mis-statement or suppression of material may mean the cancellation of any appointment, which is also subject to the receipt of satisfactory references, and I give my permission for the use of ethnic information for statistical analysis.

I authorize RBG Ltd to obtain and process references to support my application and release RBG Ltd from any liability caused by giving and receiving this information.

Signature:

Date: