

APPLICATION FORM

The Company is an Equal Opportunity Employer and welcomes suitable male and female applicants irrespective of religious belief, political opinion, marital status, sexual orientation, disability, race, ethnic or national origins or age.

Please read all the questions carefully, answer in **BLACK** ink and in **BLOCK CAPITALS**.

Complete all sections as fully as possible.

Applicants who are called for interview may be required to provide evidence of qualifications held

POSITION APPLIED FOR	
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SURNAME	FIRST NAMES (PLEASE UNDERLINE THE NAME YOU NORMALLY USE)

ADDRESS	
Postcode	
Telephone Number (H)	
Telephone Number (W)	
Email Address	

Do you need a work permit for employment in the U.K.?	
If yes, do you currently have a work permit for employment in the U.K.?	

NOTE : Applicants should be aware that on occasions employees are required to undertake overtime and / or shift working.

Are you prepared to work	Overtime	Shifts	At any of our locations	Do you hold a current driving licence?

If no, give details	
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State knowledge / fluency of any foreign language	
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List hobbies, activities or interests outside of work	
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EDUCATION

N.B PLEASE STATE TYPE OF SCHOOL (NOT THE NAME OF THE SCHOOL) E.G. SECONDARY / COMPREHENSIVE / GRAMMAR

TYPE OF SCHOOL	QUALIFICATIONS OBTAINED	RESULTS GAINED

FURTHER / HIGHER EDUCATION

NAME OF UNIVERSITY	DATE FROM	DATE TO	QUALIFICATIONS OBTAINED	RESULTS GAINED

DETAILS OF OTHER APPLICABLE TRAINING COURSES UNDERTAKEN. CONTINUE ON A SEPARATE SHEET IF NECESSARY

MEMBERSHIP OF PROFESSIONAL / TECHNICAL BODIES. CONTINUE ON A SEPARATE SHEET IF NECESSARY

PRESENT / MOST RECENT WORK EXPERIENCE

NAME OF EMPLOYER			
ADDRESS		NATURE OF BUSINESS	
Postcode		Current Job Title	
Current Basic Salary		Employment Dates	
Pension Terms		Bonus / Commission	
Website		Other Fringe Benefits e.g. car	

Please outline your present duties and responsibilities, stating to whom you are responsible and who is responsible to you. You may draw a small organisational chart to illustrate reporting relationship.

Please state the attraction of the post for which you are applying and, if applicable, your reason for wanting to change your present employment.

KADEMON ESTATE
SHORTCROSS
SMALL-BATCH DISTILLERY

PREVIOUS EMPLOYMENT RECORD
INCLUDE ANY PERIODS OF UNEMPLOYMENT

NAME AND ADDRESS OF EMPLOYER	DATE FROM	DATE TO	POSITION HELD ; MAIN DUTIES ; SALARY	REASON FOR LEAVING
WHAT NOTICE ARE YOU REQUIRED TO GIVE TO YOUR PRESENT EMPLOYER?				

COMPETENCIES

PLEASE STATE HOW YOU MEET THE COMPETENCIES, AS DETAILED IN THE VACANCY ADVERT, REQUIRED FOR THE POSITION
CONTINUE ON A SEPARATE SHEET IF NECESSARY. SHORTLISTING WILL BE BASED ON THE INFORMATION PROVIDED IN THIS SECTION

DISABILITY DISCRIMINATION ACT 1995

If you require any special arrangements to be made to assist you if called for interview, please let us know in advance of the interview
yes/no

Do you have a disability that meets the flowing definition:

Disability discrimination legislation states that a person has a disability if he/she has a physical or mental impairment which has a substantial or long term adverse effect on his/her ability to carry out normal day to day activities.

Do you meet (or have you in the past, met) this definition? YES / NO

If yes please state what reasonable adjustments, provisions or facilities may be required in the selection process

**MONITORING INFORMATION
EQUAL OPPORTUNITIES MONITORING QUESTIONNAIRE**

Date of Birth _____

Sex _____

Marital Status (underline / circle as appropriate)

Married

Single

Divorced

Separated

Widowed

Caring Responsibilities (underline / circle as appropriate)

None

Children

Elderly Relative(S)

OTHER

COMMUNITY BACKGROUND

I am a member of the Protestant community

I am a member of the Roman Catholic community

I am member of neither the Protestant nor Roman Catholic Community

The Disability discrimination Act 1995 legislation states that a person has a disability if he/she has a physical or mental impairment which has a substantial or long term adverse effect on his/her ability to carry out normal day to day activities. Do you meet (or have you in the past, met) this definition? YES / NO

If yes please underline which best describes your disability

Mobility

Mental

Vision

Learning

Hearing

Speech

Dexterity/Co-ordination

Ethnic Origin

- Please state -

Thank you for your co-operation in completing this questionnaire

REFERENCES

NAME :	NAME
POSITION:	POSITION:
COMPANY	COMPANY
ADDRESS	ADDRESS
TEL NO	TEL NO
NATURE OF RELATIONSHIP	NATURE OF RELATIONSHIP

DECLARATION

I declare that the information I have provided on this application for employment is, to the best of my knowledge, accurate. I understand that the provision of false or misleading information in connection with my application or the omission of relevant information, may result in rejection of my application or in dismissal if I have been employed by the Company.
 I understand that UK security clearance will be mandatory for this position.
 I further understand and agree that Rademon Estate Distillery Limited may make enquiries into my previous employment history.

Signed

Date

Note : Applicants should be aware that in certain circumstance the Company may be obliged to provide information contained in job applications to statutory bodies.

Please forward application form together with cv via email to sales@shortcrossgin.com