

EMPLOYMENT DETAILS:

Please give details of previous employment (most recent first)

Name & Address of Employer:	Job Title & Main Duties & Responsibilities:	Reason for leaving:
Telephone Number:	Dates Employed: From: To:	Rate of pay:
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EDUCATION:

Place of study:	Subject:	Qualification:	Date:

VACANCY SPECIFIC QUESTIONS:

Tell me what attracted you to this role?

Our customers are our number one priority. What qualities/skills will you bring to Johnsons to help us deliver exceptional customer service?

As a company we aim to constantly out improve and excel. Tell me when how you last demonstrated going above and beyond your job role?

We believe in recruiting people with the right attitude. Describe a recent problem you had to manage, what happened and what was the outcome?

FITNESS TO DRIVE:

PCV regulations require that you pass a vocational medical examination to prove your fitness to drive large vehicles. Have you undergone a PCV medical examination?

YES NO

If you do not have a PCV Medical please indicate below any condition which may effect your application in a 'fitness to drive' medical

Diabetes	<input type="checkbox"/>	Any condition effecting the eyes	<input type="checkbox"/>	Giddiness	<input type="checkbox"/>
Fits/Blackouts	<input type="checkbox"/>	Heart Condition/Cardiac Implant	<input type="checkbox"/>	Stroke / TIA	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	Sleep Apnoea Syndrome	<input type="checkbox"/>	Any Chronic Neurological condition	<input type="checkbox"/>
Narcolepsy	<input type="checkbox"/>	Any Persisting limb problem	<input type="checkbox"/>	Parkinsons disease	<input type="checkbox"/>

Are you taking any prescribed medication which may effect your fitness to drive?

YES NO

REFERENCES:

Please provide the names and addresses of your two most recent employers for references. If you have not had two previous employers then please provide referees from college or school. Your employment is subject to receipt of satisfactory references.

Name of Referee and company	Position:	Telephone & email address:	Address:

CRB/DBS DISCLOSURE:

Due to the nature of the work you will be undertaking you will be subject to a enhanced CRB/DBS police check. It is important that you complete the following section correctly?
Are there any criminal cases pending against you or have you ever been convicted or cautioned in relation to any crime? YES NO

If you have answered yes please give brief details:

THE INFORMATION YOU HAVE PROVIDED:

I declare that the statements I have made on this form are, to the best of my knowledge true and complete. I understand that the company reserves the right to withdraw any offer of employment or to summarily terminate any employment already commenced, if the information given by me is deliberately incorrect or misleading in any way. I understand that my employment is subject to the receipt of references and CRB/DBS disclosure that are satisfactory to the company. Data Protection Act: the information given to us in this form will only be used in relation to your application for employment. By signing this declaration you are giving us your express consent to retain this information under data Protection Act 1998

SIGN:

DATE: / /

PRINT NAME:

JOHNSONS
QUALITY COACH AND BUS TRAVEL

We aim to respond to every application, however, due to the amount received, there may be occasions when we are unable to do this. Therefore, if you have not heard from us within 28 days, please assume that your application has been unsuccessful on this occasion.