

# Martins Cleaning Services Limited

A professional & equal opportunity employer

## Application for New employment

Start date –

Office use only

Please indicate the  
Hours you are  
available for work?

AM .....

PM .....

Position Applied for (Circle) Cleaner or Supervisor  
Area Manager or Carpet Tech or office

(Please complete this form **fully** in **black ink**)

**PLEASE INCLUDE A C.V. FOR AREA MANAGER, SUPERVISOR OR CARPET TECHNICIAN VACANCY/S**

Title:	Full Name:
Address:	
Post Code:	
Telephone Number:	Mobile :
e.mail address –	

<b>National Insurance Number:</b>
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<b>Office Use only/Payroll Number:</b>
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Date of Birth: ..... Current Age: .....  
Place of Birth: ..... British Citizen : Yes / No  
Marital Status: ..... Number of Dependants: .....

### Education & Employment History

<u>Name of school or college last attended:</u> ..... .....
<u>Please list any examination passes:</u> ..... .....
<u>Names of last 3 employers -</u> ..... Date.from..... To..... ..... Date.from..... To..... ..... Date.from..... To.....

**Please return application form to: Martins Cleaning Services Ltd**  
**PO Box 612, Exeter EX1 9HY Tel: 01392 670700**

Application form for – Martin's Carpet & Upholstery Cleaning Service and Martins Cleaning Services Ltd

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## SUPPORTING DOCUMENTATION

Position Applied for: \_\_\_\_\_

Application form for – Martin's Carpet & Upholstery Cleaning Service and Martins Cleaning Services Ltd

Title:	Full Name:
Address:	
Post Code:	
Telephone Number:	Mobile :
e.mail address –	

**Cleaning Industry training –**

Have you previously been employed within this industry      **Yes/No (Delete)**

What was you position .....

Do you have any industry training certificates?      **Yes/No (INDICATE)**

BICS      **Yes/No** (Delete as applicable)

NVQ      **Yes/No** (Delete as applicable)

OTHER      **Yes/No** (Delete as applicable) ..... (Describe)

.....

**You are required to produce all certificate/s at an interview with us.**

PLEASE CONTINUE ON A SEPARATE PIECE OF PAPER IF NECESSARY

**FULL TRAINING WILL BE GIVEN SHOULD YOU BE SUCCESSFUL**

Please describe why you would like to be considered for this position and what qualities you will have –

.....

.....

.....

Please write below any other information that will help with your application and any role within any other employment that may be considered.

.....

.....

Wage band: State rate of pay preferred £5 - £6 p/hr/£6 - £7 p/hr/ £7- £8 p/hr  
Other please state -

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# MARTINS CLEANING SERVICES LTD



## PART TWO

### Health Questionnaire

Nat. Ins. No.

.....

### Confidential

(Please print clearly using black ink)

Name: .....

Date of birth: .....

Address:  
.....  
.....  
.....

Name and address of **G.P.**  
.....  
.....

..... GP Telephone Number: .....

National Health Number: .....

**Next of Kin** - (Usually Parent/s or husband/wife):  
.....

Address:  
.....

Relationship:  
.....

Home Tel. Number: ..... Work: Tel. No. ....

.....

Are you currently being treated for any illnesses? **Yes/No** Describe - .....

Are you currently taking medication prescribed? **Yes/No** Describe .....

Are you currently taken any un-prescribed medication? Yes/No

**Describe exactly what it is** .....

Do you consider that this may affect your performance at work? **Yes/No.**  
How? .....

What, (if any) **allergies** do you have? .....

.....

Do you consider yourself fit & Healthy? **Yes/No**

Do you have any back or back related injuries? **Yes/No**

Do you have any special learning needs? .....

Describe your needs – .....

Do you have asthma? **Yes/No** Do you have the use of an inhaler? **Yes/No**

Any information not given that may or will result in poor performance will result in dismissal.

**PLEASE ATTACH ANY OTHER DOCUMENTATION IN RESPECT TO YOUR HEALTH to be declared.**

Please sign and attach to this application any other important information.

Are you currently employed? Please provide details of this **or last** employer:

Name of employer: .....

Address of Employer: .....

.....

.....

What is/was your position? .....Are you employed by anyone else? **Yes/No**

When did this job commence? .....Are you still employed? **Yes/No**

Is this job permanent? .....Current Rate of Pay (You may decline to answer) .....

Are you being transferred to us from any other company under TUPE. **Yes/No**

Do you have a valid TUPE contract with any other company that you are transferring to us: **Yes/No**

Are you Self-employed? **Yes/No** What trade?..... Permanent? **Yes/No**

**Skills**

Do you have any of the following certificates?

First Aid? ...Yes/no. Food hygiene? ...Yes/no. (Please circle)

Do you have a full drivers licence? ... Yes/no. (Please circle)

What skills do you have that you feel will be useful in this position?

.....

.....

.....

(Full training will be given if your application is successful)

**Required: VISA.CITIZENSHIP AND PASSPORT PHOTOCOPIES**

**If you are in this Country short-term, what date will you be required to leave? .....**

Please give details of a minimum of one employer whom we may contact prior to a job offer being confirmed.

1.....2.....

**DECLARATION**

I \*have/have not been prosecuted or received a police warning in the last ten years.

(\*Delete as applicable). Please give full details:

Offence/s: .....

.....

Date/s: .....

Penalty: .....

**The information contained in this application is correct to the best of my knowledge. I understand that any false information knowingly given would lead to my instant dismissal if I were employed by this company. I understand that any undeclared prosecution will lead to my instant dismissal. Confidentiality must be kept at all times with regards to our clients and our clients business. If I disclose any information to any other party associated or un-associated to this company I will be subject to disciplinary action and immediate dismissal. I understand that I will be prosecuted in the event of theft or any related matter where I am fully or partly responsible. Confidentiality must be adhered to at all times.**

**Signed:** ..... **Dated**.....