Nidd Transport Application Form



About You

	L	Part time		
		Full time		
	t	_	ı	
Title:				
First Name:	Surname:			
riist Naiile.	Surname.			
Address:				
	Postcode:			
Contact Number:	Alternate N	lumber:		
Email Address:				
Do you have authority to work in the UK?	Г	Yes No	1	
Are you authorised to work in the UK unrestricted of any visa?	ŀ	Yes No		
Are you authorised to work in the ox unlestricted or any visa:	L	162 110		
- 15. I II III 0	г		1	
Do you consider yourself to have a disability?	L	Yes No		
Please tell us if there are any reasonable adjustments we can make	to assist you	ı in your application o	r with our r	ecruitment
process:				
Do you hold a current Driving Licence? Yes No		Any Endorsements?	Yes	No
		•		
For what class of vehicle?				
For what class of vehicle?				
	Salany Evno	ctations:		
For what class of vehicle? Current Salary:	Salary Expe	ctations:		
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Employment History



Present Employer (or last if not currently employed)

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From	То	Name and address of employer	Job title, main duties and skills you have learnt
Reason for	r Leaving		Average gross pay (per week/monthly/annum)
From	То	Name and address of employer	Job title, main duties and skills you have learnt
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Reason for	r Leaving		Average gross pay (per week/monthly/annum)
From	То	Name and address of employer	Job title, main duties and skills you have learnt
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Reason foi	r Leaving		Average gross pay (per week/monthly/annum)

No approach will be made to your present or past employer(s) before an offer of employment is made and accepted by you

Education and Practical Skills



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From	То	Name and address of school	Qualifications earned

Further Education

From	То	Name and address of College/University etc.	Qualification(s) Earned

Practical Skills

Please summarise Job skills acquired and specialist training received:	

Other Information



Reference's to support your application Reference 1 Reference 2 Name: Name: Company: Company: Email: Email: Phone: Phone: No approach will be made to your present or past employer(s) before an offer of employment is made and accepted by you Do you have any other commitments which may impact your working hours? E.g. Judicial, Yes Military, Local government etc. No If 'Yes', please describe how this may effect your working hours: Declaration Please read carefully then sign and date your application **Applicants Signature** Date I confirm that the above information is correct and understand that misleading statements may be sufficient grounds for cancelling any agreements made. Please email a copy of your application form together with your current CV to Heather.Glegg@nidd-transport.com

All personal data held by Nidd Transport ltd. is GDPR compliant. Please see our website for privacy policy and GDPR Notice for job applicants

	OFFICE USE ONL	_Y		
r and terms an	d conditions of employment sent:	Yes	No	
	r and terms and	r and terms and conditions of employment sent:	r and terms and conditions of employment sent: Yes	

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NIDD TRANSPORT LTD

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