

Skills Base

Please list & indicate on a rating (1 = Poor - 5 = Excellent) on skills below

Skill	Rating	Where Gained

Employment History

Please detail your most recent employer

Employer:

Job Title:

Address:

From:

To:

Referee:

Main Responsibilities:

Key Achievements:

Reason for Leaving:

Employment History

Employer:

Job Title:

Address:

From:

To:

Referee:

Main Responsibilities:

Key Achievements:

Reason for Leaving:

Employment History

Employer:

Job Title:

Address:

From:

To:

Referee:

Main Responsibilities:

Key Achievements:

Reason for Leaving:

Employment Profile

Salary Expected:

Minimum Considered:

Notice required for Resignation:

Notice required for Interview:

Medical Details

Are you currently receiving any medical treatment?	YES / NO
Have you had any significant illnesses in the past?	YES / NO
Do you have any allergies?	YES / NO
Do you have impaired hearing?	YES / NO
Do you have impaired sight/vision?	YES / NO
If yes, what was the date of your last eye test?	_____
Do you suffer from any back, disc or arthritic conditions?	YES / NO
Do you suffer from heart or blood pressure disorders?	YES / NO
Do you suffer, or have you suffered in the past, with epilepsy?	YES / NO
Have you ever had a stress related illness?	YES / NO

Work Eligibility

Do you need a permit to work in the UK:	YES / NO	_____
If YES, do you have permission to work in the UK:	YES / NO	_____
Is there a time Restriction:	YES / NO	Duration: _____

Declaration

I confirm that the information given on my application is true and complete to the best of my knowledge and there is nothing further, about which I am aware, that should be taken into account when offering me work. I understand that should any information prove inaccurate, my employment with Haas Automation Ltd may be terminated.

Signed: _____ Print Name: _____ Date: _____



Please complete this application form, sign the declaration and email to pfenn@haas.co.uk

HAAS AUTOMATION LTD

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