

**Compound 1, Magnet Road
East Lane Business Park
Wembley
Middlesex
HA9 7RG**

**Tel: 020 8908 0785
Fax: 020 8904 3124**

Employment Application

Date of application...../...../.....

Position applied for.....

Personal Details

Name.....

Address.....

Postcode.....

Contact phone number.....

National Insurance Number.....

Licensing Details

Driving License No.....

PSV Pass date...../...../.....

Driver CPC expiry date...../...../.....

Digital tachograph expiry date...../...../.....

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**72-59-53-41 Seater Coaches / 36-33-30 Seater Midi-Coaches
22-19 Seater Mini-Coaches**

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Education

Date of leaving full time education...../...../.....

Details of qualifications gained.....

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Details of any other qualification held or training courses attended that you feel may be of
relevance to your application.....

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Employment History

Please provide a full employment history below, if you need more space then please complete on a separate sheet. Any gaps in your employment history will need to be explained.

Employer.....

Position held.....

Start date...../...../..... End date...../...../.....

Reason for leaving.....

Employer.....

Position held.....

Start date...../...../..... End date...../...../.....

Reason for leaving.....

Employer.....

Position held.....

Start date...../...../..... End date...../...../.....

Reason for leaving.....

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Employment History continued

Employer.....
Position held.....
Start date...../...../..... End date...../...../.....
Reason for leaving.....

Employer.....
Position held.....
Start date...../...../..... End date...../...../.....
Reason for leaving.....

Employer.....
Position held.....
Start date...../...../..... End date...../...../.....
Reason for leaving.....

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References

Please provide details of two people who we can contact to obtain a reference for you. At least one must be a previous employer and cannot be a member of your family. We will not contact your current employer until you are successful with your application.

Company Name.....

Address.....

Phone number.....

Contact name if any.....

Company Name.....

Address.....

Phone number.....

Contact name if any.....

Please read the below declaration carefully before signing.

I declare that the information given above is true to the best of my knowledge and belief. By signing this application I give Bessway Travel Ltd permission to check my driving license on gov.uk with the details I have provided. I understand that any offer of employment can be terminated without notice if it is found that I have given false information on this application, or I have deliberately withheld material facts.

Print Name..... Signed..... Date...../...../.....

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