



CLEANING OPERATIVE APPLICATION FORM

Name:	
Home Address:	
Tel:	
Email:	
Do you live in: House Flat [If a Flat what floor]	
Do you have a full driving license? Yes No	Type of license you hold? Manual Auto
Number of years license held	Points on your license (if applicable)
Do you own a vehicle? Yes No	
Smoker:	Non-Smoker:

If you are not a UK national you may not be eligible to work in the UK, please indicate if you require:	
A work permit: Yes No	A right to work visa: Yes No

<p>This is a physical job – are you fit and healthy?</p> <p>Do you suffer from any health problems? Yes No If yes please state:</p> <p>Have you ever had any fits or blackouts? Yes No</p> <p>We use chemicals in the van, do you have any allergies? Yes No</p> <p>Are you prepared to work some Saturdays/six days when we are busy? Yes No</p> <p>Do you have to be home at a certain time in the evening; we can often work past 5:30pm? Yes No</p> <p>Are you practical, sometimes we need to take the oven doors apart? Yes No</p> <p>Can you find your way around / can you use a map? Yes No</p> <p>Can you park the van directly outside your home, with access to an electricity supply? Yes No</p> <p>Do you have off road parking facilities? Yes No</p>

EDUCATION & TRAINING				
Schools / Colleges	Dates (month & year)		Qualifications	Grade
	From	To		



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CURRENT EMPLOYMENT

Current employment:

Position held and responsibilities:

Dates: From: To:

Current salary:

When could you start?

Do you have to give notice?

Reason for leaving, if applicable:

Can we contact your current employer?

WORK HISTORY

Name and address of employer:

Position held and responsibilities:

Dates: From: To:

Reason for leaving, if applicable:

Name and address of employer:

Position held and responsibilities:

Dates: From: To:

Reason for leaving, if applicable:



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In 250 words or less please tell us why you think you would make a good candidate for this position?

In 250 words or less please tell us why you want to be an oven cleaning technician:

REFERENCES

Please supply names, addresses and telephone numbers of **two** referees (other than relatives or friends) with knowledge of you and your work to whom professional reference can be made. One should be your current (*if possible*) or most recent employer.

Present or most recent employer

Name:

Full address:

Position held:

Telephone:

Other referee

Name:

Full address:

Nature of contact:

Telephone:



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DECLARATION

You are required to sign the declaration below certifying that all the information you have provided is accurate.

Providing incorrect information or deliberately concealing any relevant facts may result in disqualification from the selection process or, where discovery is made after an appointment, in summary dismissal.

I declare the information on this form is correct and I have omitted nothing that, to the best of my knowledge, might affect this application.

Signature:

Date:

Please send your completed application form along with your C.V. any other information you may feel useful in your application.

Return via email to:

info@ovensheen.com

or Post

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