

**Acumen Distribution Limited**

Unit 4 Redbourne Park  
Liliput Road  
Brackmills Industrial Estate  
Northampton  
NN4 7DT



Telephone: +44 (0)1604 748888  
Fax: +44 (0)1604 748874

**APPLICATION FOR EMPLOYMENT**

PLEASE COMPLETE ALL QUESTIONS ON THIS FORM IN BLOCK CAPITALS

It is the Company's policy to employ the best qualified personnel and provide equal opportunity for the advancement of employees including promotion and training and not to discriminate against any person because of race, colour, disability, national origin, gender, marital status, sexual orientation or age.

Position applied for: \_\_\_\_\_

Surname: \_\_\_\_\_ First Name(s): \_\_\_\_\_

\*Mr/Mrs/Miss/Ms

Preferred Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Post Code

Telephone No. \_\_\_\_\_

NI Number

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**PAST EMPLOYMENT** (please attach your CV if appropriate)

Employer	Dates of Employment		Position Held	Duties	Reason for Leaving
	From	To			

Willing to work: \*Days \*Shifts \*Nights \*Rotating Shifts

\*Delete as appropriate

**REHABILITATION OF OFFENDERS ACT 1974**

1. The above Act allows employers to request details of certain convictions held against individuals. Please complete the box below in respect of any convictions relevant to the following periods. If there are none, please say so.

**AT ANY TIME:** Have you been sentenced to imprisonment or corrective training for more than 30 months? YES/NO

**DURING THE LAST 10 YEARS:** Have you been sentenced to imprisonment or corrective training for more than 6 months but less than 30 months? Have you been cashiered or dismissed with disgrace from HM Forces? YES/NO

**DURING THE LAST 7 YEARS:** Have you been sentenced to imprisonment for 6 months or less? Have you been dismissed from HM Forces? Have you been sentenced to any Borstal Training? YES/NO

**DURING THE LAST 5 YEARS:** Have you been sentenced to detention whilst in HM Forces. Have you been convicted as a Young Offender and been sentenced to detention of more than 6 months but less than 30 months? Have you received a fine or other sentence (other than imprisonment)? YES/NO

Date of Conviction	Offence(s) for which convicted	Sentence

2. **PENDING CASES:** Do you have any charges currently pending? If so, please give details:

Offence(s)	Probable date of Hearing

**DRIVING LICENCES**

**ORDINARY LICENCE** Date Driving Test Passed: \_\_\_\_\_ Groups: \_\_\_\_\_

**FULL/PROVISIONAL** Driver No: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Have you any driving prosecutions pending? YES/NO

**HGV LICENCE** Class: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Date First Granted: \_\_\_\_\_ Current Licence No: \_\_\_\_\_

**NEXT OF KIN**

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No:

\_\_\_\_\_

RELATIONSHIP

\_\_\_\_\_

**DOCTOR'S NAME**

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No:

\_\_\_\_\_

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**NAME OF TWO REFEREES  
(Previous employers)**

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No:

\_\_\_\_\_

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No:

\_\_\_\_\_

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**EDUCATION GRADE OR PROFESSIONAL TRAINING**

**EDUCATION**

School: \_\_\_\_\_

Dates: \_\_\_\_\_

Subject	Level	Date	Pass/Fail	Grade

**TRADE TRAINING**

Trade: \_\_\_\_\_

Apprenticeship Served with: \_\_\_\_\_

Dates: \_\_\_\_\_

Results: \_\_\_\_\_

**FURTHER EDUCATION**

Establishment: \_\_\_\_\_

Subjects taken: \_\_\_\_\_

Dates: \_\_\_\_\_

Results: \_\_\_\_\_

**PROFESSIONAL EDUCATION**

Profession/Subjects studied: \_\_\_\_\_

University or Company: \_\_\_\_\_

Dates: \_\_\_\_\_

Degree of Result: \_\_\_\_\_

**Leisure and Hobby Interests:** \_\_\_\_\_

**BANK ACCOUNT DETAILS (TO BE COMPLETED ONLY IF A JOB OFFER IS MADE)**

Please pay my wages/salary into my Bank Account. The details are:

Sorting Code 

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Bank & Address: \_\_\_\_\_

Account No: \_\_\_\_\_

Name in which Account is held: \_\_\_\_\_

**DECLARATION**

I declare that all questions have been answered truthfully and I understand that any falsification contained in this Application Form will render me liable for instant dismissal. I acknowledge that an offer of employment with ACUMEN DISTRIBUTION Ltd will be subject to satisfactory references, satisfactory completion of a medical questionnaire, and a medical examination if required.

Date: \_\_\_\_\_ Applicants Signature: \_\_\_\_\_

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**TO BE COMPLETED BY THE EMPLOYING MANAGER\***

Date application received: \_\_\_\_\_

Interview held on: \_\_\_\_\_ by: \_\_\_\_\_

Driver Assessment by: \_\_\_\_\_ (DRIVERS ONLY)

Job: \_\_\_\_\_ Perm/Temp: \_\_\_\_\_

Depot/Department: \_\_\_\_\_ Starting Date: \_\_\_\_\_

Starting Rate: \_\_\_\_\_ Shift: \_\_\_\_\_

Reporting to: \_\_\_\_\_ Probation period: \_\_\_\_\_

Other Comments: \_\_\_\_\_

**\*ENSURE THAT BANK DETAILS PAGE IS NOW COMPLETED AND ENTIRE FORM SENT TO HR  
MANAGER**

**The following documents should be placed on the personnel file at Northampton:**

Copy Driving Licence: \_\_\_\_\_ Induction Form: \_\_\_\_\_  
(Drivers only)

Signed Contract: \_\_\_\_\_ Training Record: \_\_\_\_\_

Expression of Wishes: \_\_\_\_\_

Date: \_\_\_\_\_ Signed: \_\_\_\_\_  
(Manager/Supervisor)