

Cleaning Operative Application Form

Name.....

Address

..... Post Code

Tel..... Male/Female.....

Age..... Height..... Smoker/Non-smoker

Marital status

DOB

Home owner/flat/rental

Do you have a full clean driving licence

This is a physical job are you fit and healthy?.....

Do you suffer from any health problems?

Have you ever had fits or blackouts?

We use Chemicals in the van, do you have any allergies,
hay fever, etc

Do you have a criminal record?

Current employment/position

Previous employment/position

Current salary

When could you start?

Do you have to give notice?

Are you prepared to work some Saturdays / six days
when we are busy?

Do you have to be home at a certain time in the evening,
we often work past 6pm

Are you practical, sometimes we need to take the oven doors apart?

Can you find your way around / can you use a map?

Do you have off road parking?

Please supply names, addresses and telephone numbers of two referees. One
must be a previous employer.

Please enclose any other information you feel useful in your application.