

Job Application Form

Position applied fo	r:				
If relevant please s are applying to.	tate whi	ich Purvis company you			
		TION SUPPLIED ON THIS I			
Section 1 - PERS	ONAL	DETAILS			
Last name:			First name(s):		
Address:					
D+]		
Postcode:					
Home telephone			Mob	ile no.	
Email address:					
National Insurance no.					
Are you eligible to w	ork in the	e UK?		Yes	No
Do you hold a full Ul	K driving	licence?		Yes	No
If YES, do you have your own or access to a vehicle for travelling to work?			Yes	No	
Have you previously been employed by any of the Purvis Group companies? Yes			No		
If Yes, please give de	etails belo	ow stating which company a	and time period:	•	

Section 2 - PRESEN	IT EMPLOYMENT	
Name & Address of current employer :		
Postcode:		
Present post:		
Brief description of duties :		
Date of appointment:	Salary & benefits	
Notice required:	or last day of service	
Reason for leaving:		
Section 3 - PREVIO	US EMPLOYMENT (to cover atleast the last 3	3 years.)
Name of employer (1)		
Post:		
Brief description of duties :		
Date from:	Date to:	
Reason for leaving:		
Name of employer (2)		
Post:		
Brief description of duties :		
Date from:	Date to:	
Reason for leaving:		
Name of employer (3)		
Post:		
Brief description of duties :		
Date from:	Date to:	
Reason for leaving:		

Section 4 - EDUCATION & PROFESSIONAL QUALIFICATIONS

School/College/University		Course or Subjects		Qualification/Grade attained		
Please note any profe	ssional/manage	ment qualifications or memberships	you have below:			
Course detail/Profess	ional or technic	cal association	Qualification	/Membership level		
Section 5 - TRAINING & DEVELOPMENT Give details of any training and development courses which may support your application. This may include any on the job training as well as formal courses. Results						
Date(s)		Course title/Achievement		(where applicable)		
valid CSCS/CPCS/NPOI	RS card which d	anisation all of our construction site enotes a required competency with	n the Constructio	-		
valid CSCS/CPCS/NPOI	RS card which deing applied for	enotes a required competency with	n the Constructio	-		
valid CSCS/CPCS/NPOI relevant to the post be	RS card which deing applied for	enotes a required competency with then please enter card details below	n the Constructio	n Industry. If this is		

Have you had any days/weeks absence due to sickness or ill health in the past 2 years? If Yes, please provide details below e.g. cause and duration Reason for absence No Section 7 - PERSONAL STATEMENT Please use this section to detail any other skills, achievements, knowledge or experience you have in styour application for this post. (continue on a separate sheet if necessary).	
Reason for absence No Section 7 - PERSONAL STATEMENT Please use this section to detail any other skills, achievements, knowledge or experience you have in state of the section of the s	
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our application for this post. (continue on a separate sneet if necessary).	upport

Upon any formal appointment you will be required to complete a confidential statement of medical history and

Section 6 - HEALTH

Section 8 - REFERENCES Please provide the names and addresses of two references. At least one should be your previous employer. If you have not previously been employed then a Head teacher or lecturer who is able to comment on your educational background would be acceptable Name: Name: Position: Position: Company: Company: Address: Address: Phone no. Phone no. Email: Email: **Section 9 - DECLARATION** How & where did you learn about this post? I hereby certify that: all the information given by me in this form to be correct to the best of my knowledge; all questions relating to me have been answered fully and truthfully; I possess all of the qualifications to which I claim to hold; I understand should my application be successful and it be discovered subsequently that the information provided has been falsified then disciplinary action may result in dismissal from this post. Signed: Date: Any candidates selected for interview will normally be notified within four weeks of submission. Unfortunately, applicants who do not hear from the Purvis group within this time should conclude that their application has been unsuccessful on this occasion, but we thank you for your interest in the post. The Purvis group will treat any personal information contained within the form as confidential and in full compliance with the requirements of the Data Protection Act 1998. Section 10 - RETURNING THIS FORM Upon completion of this form please ensure it is returned to the following address: or alternatively by email to: By post to: **Group Personnel Manager Purvis Group New Thistle House**

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Lochview Industrial estate

Lochgelly Fife KY5 9HG recruitment@purvisgroup.co.uk

Use the space below to add in any other information					
Section No.	Additional details				

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Section 11- RECRUITMENT MONITORING

Position applied for:

The Purvis Group are committed to ensuring we promote equality of opportunity for all staff and new job applicants. We seek to ensure all applicants are treated fairly, with respect to, and without bias regardless of colour; race; nationality; ethnicity; sex; marital status; disability; sexual orientation; gender re-assignment; pregnancy or maternity; religious or political beliefs or age. It is the aim of the organisation that its workforce should reflect that of a local and wider community wherever practicable.

This policy applies to recruitment and selection practices, training and promotion or transfer within the company.

In order to monitor and ensure the success of this policy all applicants for positions within the organisation are respectfully asked to complete the section below. The details contained herein will be retained by the HR department solely for monitoring purposes. Failure to complete this section will not affect your application in any way.

This sheet will remain separate from the application and will not form any part of the selection process.

Gender:	Mal	e	Female	•		
Age group : (at time of appl	Under 2 lication)	5 25-34	35-44	45-54	55-64	65+
ETHNIC ORIGIN						
I would describe	e my ethnic origin as:	(please tick one of	the following)			
White	British	Irish	Europea	an*		
Black	African	Caribbean	Other	-*		
Black-Asian	Indian	Pakistani	Banglad	eshi		
Other	Chinese	Mixed	Other	*		
* Please specify						
We are aware that some people may not be happy with the classifications used on this form and if you wish to classify yourself in some other way please use the '*please specify' box to do so.						
DISABILITY						
Do you consider yourself to be disabled? Yes No						No
If you have ticked 'Yes', are you registered disabled?					Yes	No
Would you require any special adaptions/equipment to take up employment? Yes No						No
If you have answered 'Yes' to any of the above questions, can you please provide details in the space below:						

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