

# HYDRAINER PUMPS

**Hydrainer Pumps Limited**

MANUFACTURERS OF HYDRAULIC SUBMERSIBLE PUMPS

Registered Office:

Rotherham Close, Norwood Industrial Estate,  
Killamarsh, Sheffield S21 2JU  
Telephone: 0114 248 4868 Fax: 0114 251 0136  
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## APPLICATION FOR EMPLOYMENT

POSITION ..... ADVERTISED IN .....

SURNAME ..... FIRST NAME(S) .....

ADDRESS .....

.....

.....

TELEPHONE (HOME) ..... NATIONALITY .....

TELEPHONE (MOBILE) ..... HEIGHT .....

CONDITION OF HEALTH ..... WEIGHT .....

..... DO YOU SMOKE? .....

ARE YOU A REGISTERED DISABLED PERSON? ..... IF SO, GIVE R.D.P. NO .....

DO YOU HAVE A CURRENT DRIVING LICENCE? ..... ENDORSEMENTS/POINTS .....

DETAILS OF ACADEMIC QUALIFICATIONS .....

.....

.....

DETAILS OF ANY TECHNICAL OR COMMERCIAL TRAINING .....

.....

HAVE YOU SERVED AN APPRENTICESHIP? ..... TRADE .....

.....

NAME AND ADDRESS OF COMPANY .....

.....

.....



**Hydrainer Pumps Limited**

*Continuation sheet*

PLEASE GIVE DETAILS OF RELEVANT EXPERIENCE

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.....

LAST/PRESENT EMPLOYER ..... FROM ..... TO .....

ADDRESS  
.....  
.....

POSITION HELD ..... RATE OF PAY ..... PER .....

BRIEF DETAILS OF JOB DESCRIPTION AND ANY SPECIAL RESPONSIBILITIES HELD .....

.....  
.....  
.....

REASON FOR WANTING TO LEAVE YOUR CURRENT EMPLOYER

.....  
.....

PERIOD OF NOTICE TO BE GIVEN .....

EXISTING HOLIDAY  
COMMITMENTS.....

MAY WE REFER TO YOUR PRESENT/PREVIOUS EMPLOYER?

.....

DETAILS OF ANY PART-TIME COMMITMENTS (OR CHARITY WORK, COUNCIL WORK, ETC.) .....

.....

HOBBIES AND INTERESTS

.....



HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE? YES / NO IF YES DETAILS.....

WERE YOU EVER DISMISSED FOR DISHONESTY? .....

DO YOU BELONG TO A TRADE UNION? ..... IF SO, WHICH? .....

ANY OTHER INFORMATION RELEVANT TO YOUR APPLICATION? .....

NAME / ADDRESS / PHONE NUMBER OF TWO REFEREES (STATE WHETHER EMPLOYER, OR OTHER)

1) ..... 2) .....

..... TEL:..... TEL.....

PLEASE READ THE FOLLOWING CAREFULLY, AND THEN SIGN BELOW.

I certify that my statements on this Application Form are true, and I accept that any Conditions of Employment that may result from this Application are based on the facts as given. Any statement found to have been wilfully given incorrectly may be grounds for dismissal.

Signature of Applicant ..... Dated .....

**REST OF FORM TO BE COMPLETED BY INTERVIEWER**

1st INTERVIEW BY ..... POSITION ..... DATE .....

COMMENTS .....

2nd INTERVIEW BY ..... POSITION ..... DATE .....

COMMENTS .....

ACCEPTED? ..... REFUSED? ..... FORM TO BE KEPT ON FILE ? .....

STARTED EMPLOYMENT ..... LEFT COMPANY .....

REASON FOR LEAVING .....

