



# THE MERE

Chester Road, Mere, Knutsford, Cheshire, WA16 6LJ  
Tel: 01565 830155 Email: [careers@meregolf.co.uk](mailto:careers@meregolf.co.uk)

## Application Form

### Your Details

Forename(s)		Surname	
Title	Mr Mrs Miss Ms other (please state)		
Address			
Postcode		Email	
Tel: Home		Tel: Mobile	

Position applied for			
Where did you hear about this vacancy?			
Have you previously been employed by us? (If yes, please give details and dates)	Yes / No		
If you are disabled, please give details of any special arrangement you would require to attend an interview			

Do you have the right to live and work in the UK and where necessary, hold a work permit?	Yes / No
Do you hold a current full driving licence	Yes / No
Do you have use of a vehicle	Yes / No

**Your Application**

Please use the space below to say why you are interested in post you have applied for, including relevant experience, training and skills which may assist your application

Please continue on separate sheet if necessary

Please use the space below to tell us about your interests outside work

Please continue on separate sheet if necessary



## Education/Training and Qualifications

Please list starting with most recent

Qualification gained or pending (you may be asked to produce evidence of these at interview)	Grade	Date Achieved	School/University/College or awarding body

## References

Please give details of two referees, one of whom should be your current or most recent employer. The other **should not** be a relative or partner.

First Referee		Second Referee	
Name/Address		Name/Address	
Postcode		Postcode	
Tel No.		Tel No.	
Title/Position		Title/Position	
Relationship to applicant		Relationship to applicant	

\* Please note that no approach will be made to your present employer before an offer of employment is made to you.

## Declaration

I declare that the information I have given on this form is, to the best of my knowledge, true and complete. I understand that if it is subsequently discovered that any statement is false, misleading or that I have withheld relevant information, my application may be disqualified. If I have already been appointed I may be dismissed after investigation. I hereby give my permission to use the data supplied on this application form for the purpose of recruitment and selection.

Name		Signature	
Date			



# THE MERE

## Equal Opportunities Monitoring Form

In accordance with its equal opportunities statement, the Company will provide equal opportunities to all employees and job applicants and will not discriminate either directly or indirectly on the grounds of race, colour, ethnic origin, nationality, national origin, sex, marital status, disability, sexual orientation, religion or age.

In order to enable that the Company ensures compliance with its policy statement, a system of monitoring has been set up. We have only asked for your name so that monitoring can take place both at the short-listing for interview stage and at the appointment stage.

You may, of course, decide not to answer one or any of these questions but if you do respond, all information provided will be treated in confidence and will be used solely by the Human Resources department for the purpose of providing statistics for equal opportunities monitoring. The monitoring form does not form part of your application and will therefore be detached from it on receipt and stored separately. You can always mail this form separately if you wish.

Thank you for your assistance in completing this form.

Name		Date of Birth	
Post Title			
Gender	Male		
	Female		
Marital Status	Married		
	Single		
	Other (please specify)		
Age Band	Under 18		
	18-29		
	30-39		
	40-49		
	50-59		
	60-65		
	Over 65		
Prefer not to say			
Disabilities	None		

	Physical Disability
	Mental Disability
	Prefer not to say
Race/Nationality	
Religion	
Have you ever been convicted of a criminal offence?	Yes / No
If so please give details	

Please be aware that depending on the circumstances around your employment or the department for which you are applying it may be necessary to carry out a Criminal Records Bureau check (CRB). Please note however that this will only be done with your prior knowledge and consent.

For the purpose of compliance with the Data Protection Act 1998, I hereby confirm that by completing this form I give my consent to the Company processing the data supplied on this form for the purpose of equal opportunities monitoring.

Name		Signature	
Date			