



# AFM Ltd Application Form

Position Applying For: .....

Surname:.....

Other names: .....

Address:.....

Postcode:.....

Telephone: ..... Mobile: .....

Email Address: .....

Do you hold a current driving licence?      Yes / No

Date of arrival in Jersey/Guernsey: .....

Are there any restrictions regarding your employment? e.g. do you require a Work Permit/ Housing Licence?      Yes\* / No

If yes, please give details

## Education and Training

Secondary schools attended and results of any examinations taken

## Information in support of your application

Please include any skills and experience you have acquired that can support this application whether within the working environment or outside.

## Employment History

Please provide details of your previous employers to cover the last 5 years – including details of any gaps in your employment

Present/previous employer .....

Address .....

Postcode ..... Email .....

Job title .....

Brief description of duties

Reason for leaving .....

Dates employed: from ..... to .....

Employer Name .....  
Address .....  
Postcode ..... Email .....  
Job title .....  
Brief description of duties

Reason for leaving .....  
Dates employed: from ..... to .....

Employer Name .....  
Address .....  
Postcode ..... Email .....  
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Employer Name .....  
Address .....  
Postcode ..... Email .....  
Job title .....  
Brief description of duties

Reason for leaving .....  
Dates employed: from ..... to .....

Please tell us why you applied for this job and why you think you are the best person for the job.

## References

Please give the names, addresses and emails or contact telephone numbers for two personal referees - other than your present employer or relatives - who we can contact now for references.

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## Medical Details

Do you have any pre-existing or on-going medical condition Yes  No

If yes, please give details

Are you fit to undertake the role that you have applied for Yes  No

If no, please give details



## Screening Confirmation

Should you be successful with your application and receive an offer of employment, please confirm that you will be able to provide the following documentation:

- Police Check – Must be dated within the last 3 months
- Passport / ID Card / Birth Certificate
- Driving Licence
- Proof of Address – Current Utility Bill
- Registration Card for Jersey/Right to Work for Guernsey
- Tax Rate / Tax Coding

## Declaration

I declare that the information given on this application form is, to the best of my knowledge, true, accurate and complete. I accept that any false statement or omission may be sufficient cause for rejection or, if employed by the Company, for dismissal.

I authorise the Company to seek reference information based on the details provided by me, except that you should not contact my current employer until I have given permission to do so.

I understand that the screening check will involve verification of the details as specified below:

- Passport/ID and relevant visas – right to work
- Financial Sanctions check
- Employment check
- Criminality check

I confirm that my consent is explicit fully informed and freely given for the purpose of the Jersey & Guernsey Data Protection Laws.

<b>Printed Name</b>
<b>Signed</b>
<b>Date</b>



Please forward your application form by post or email to:

[hr@amalgamatedfm.com](mailto:hr@amalgamatedfm.com)

**JERSEY**

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**GUERNSEY**

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