

CENTRAL HOTEL APPLICATION FORM

Please complete in BLOCK CAPITALS

POSITION APPLYING FOR:

How did you hear of the position?

Name	Surname		First	
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Address

Contact details

Mobile

Landline

E-mail

Nationality

If Non-EU citizen, do you hold a current work permit

Education

Name of Institution

Year

Course Studied

Qualification

From

To

From

To

From

To

From

To

Work Experience

Name of Company

Duration of employment

From

Til

Summary of responsibilities

Reason for leaving

Interests

Other Qualifications

I acknowledge that the details given above are an accurate summary of experience to date.

Signature of Applicant:

For official use only

General Notes:

Reference:

Name	
Telephone	
Where	
Position	
Notes:	

Name	
Telephone	
Where	
Position	
Notes:	

Expected rate of pay

Holiday Requirements

Signature of Applicant: