

The Royal Hotel

64-72 Coagh Street, Cookstown, Co Tyrone BT80 8NG

Tel: 028 867 62224 Fax: 028 867 61932 email: info@theroyal-hotel.com
Proprietor Stephen Thom

APPLICATION FORM

POSITION APPLIED FOR: Waiting Staff REFERENCE NUMBER:

Candidate Guidance

Please complete this form and return it on or before close of business on 20th February 2017, to The Royal Hotel. Late applications will not be considered.

ONLY INFORMATION PROVIDED ON THIS APPLICATION FORM WILL BE CONSIDERED BY THE PANEL. Curriculum vitae will not be accepted.

Candidates must outline clearly how their qualifications and experience meet both the essential and preferred requirements. All information given will be treated with the strictest confidence. Continuation pages/sheets may be added as necessary.

APPLICANT DETAILS	
Surname:	Telephone number (Home):
Forenames:	Telephone number (Mobile)
	Telephone number (Work):
Address:	Email:
Postcode:	

Do you have the right to work in the UK?	Yes	NO
Note: the company will require proof of this right		
before an offer of employment can be confirmed		
- eg. Passport or Official Documentation		
confirming your National Insurance Number and		
your Full Birth Certificate		
or any other appropriate document required to		
confirm your right to work in the UK as required		
by the Asylum and Immigration Act 1996		
Do you have a valid, current driving licence?	Yes	No
Have you a car/ access to a car for business use?	Yes	No

 EMPLOYMENT RECORD (Please list chronologically, starting with

Job Title:

Name and Address of

From:

Employer and Nature of Business:		Job Function/ Responsibilities:		
or business.	То:			
2. TRAINING/EDUCATION/QUALIFICATIONS				
Details of training courses attended / awards or qualifications achieved, including dates, if				
appropriate				

3. SUITABILITY FOR THIS POSITION

Please detail your suitability for this position under the relevant headings below as per the essential and desirable criteria

ESSENTIAL CRITERIA

•	Criterion 1 - Please demonstrate, with supporting evidence, that you are able to work effectively as part of team within a busy environment, with the flexibility to help out with other areas as required and always showing other staff and customers respect and honesty
•	Criterion 2 - Please demonstrate, with supporting evidence, that you have good
	communication skills are will be able to communicate confidentially and clearly with staff and customers
•	Criterion 3 - Please demonstrate, with supporting evidence, that you have customer service skills: be friendly, helpful and attentive to customers - going the extra mile to meet and exceed their expectations
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Cri	terion 4 - Please demonstrate, with supporting evidence, that you are willing and able to
WC	ork unsocial hours, shifts / split shifts
	Criterion 5 - Please demonstrate, with supporting evidence, that you are a punctual timekeeper

	undertake cleaning duties and manual handling as required		
DE:	SIRABLE CRITERIA		
•	Criterion 1 - Please demonstrate, with Previous experience of proving good of	th supporting evidence, whether you have at least customer service	
•	Criterion 2 - Please demonstrate, wit working within either a food or be	h supporting evidence, whether you have experience of everage serving environment	
•	Criterion 3 - Please demonstrate, wit experience of cash handling	h supporting evidence, whether you have experience of	
	,		
•	•	h supporting evidence, whether you have knowledge of	
	food hygiene certificate		
•	· · · · · · · · · · · · · · · · · · ·	h supporting evidence, whether you have knowledge of	
	Knowledge of manual handling and ge	eneral health and safety	
4. ATTENDANCE			
Please provide details of any absence from work you have had in the past 2 years. Please indicate the numbers of occasions, days and reasons			
Fro	om To	Reason	
Fro	om To	Reason	
Fro	om To	Reason	

Criterion 6 - Please demonstrate, with supporting evidence, that you are willing and able to

5. DISABILITY DISCRIMINATION ACT 1995

provided.

Section 1 of this Act describes a disabled person as a person with a 'physical or mental impairment which has a substantial or long-term effect on his/her ability to carry out normal day-to-day activities'.			
Using this definition, would you consider yourself to be disabled? Yes No (please tick as appropriate)			
If yes, do you require any special arrangements to be made to assist you if called for interview? Please provide details:			
6. REFEREES			
Please give the details of two work related references will <u>not</u> be contacted without your prior			
Name:	Name:		
Position:	Position:		
Company:	Company:		
Address:	Address:		
Telephone No.:	Telephone No.:		
Email:	Email:		
Nature of Relationship:	Nature of Relationship:		
7. VERIFICATION OF INFORMATION			
I certify that all information which I have provide information given may result in a job offer being			
Signature: Date:			
Please complete the separate monitoring form	n enclosed and return it in the envelope		

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