



**Innovia Films Ltd** – Station Road, Wigton, Cumbria, CA7 9BG, UK

**General**  
**A p p l i c a t i o n   f o r   E m p l o y m e n t**

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Please complete this form using BLOCK capitals and return to:  
Human Resources Department, Innovia Films Ltd, Wigton, Cumbria, CA7 9BG, UK or  
[HR.admin@innoviafilms.com](mailto:HR.admin@innoviafilms.com).

Position Applied For	
Department	
Available to take up post from	Wage / Salary expectation

If you are applying for an advertised vacancy, from what source did you learn of it?
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**Personal Details**

(Dr, Mr, Mrs, Miss, Ms) (please delete as appropriate) Surname	Forename(s)
Home Address	Address for Correspondence (if different from home address)
Post Code	Post Code
Home Telephone Number (including STD code)	Telephone Number (including STD code)
Mobile Telephone Number	E-mail Address

Place of Birth	Nationality
National Insurance Number	WRS/ Work Permit No.

Please give date(s) on which you will not be available for interview, for example annual holidays
Period of notice required

Do you hold a current full driving licence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you own a car/motorcycle? (please delete as appropriate)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you any current endorsements (give details)		

Are you eligible to work in the UK?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you require a work permit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please give details below		

Have you previously been employed by the Company ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please give details below (dates employed, positions held etc)		

If offered this position will you continue to work in any other capacity (including voluntary work) ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please give details below		

**Education and Qualifications**

School(s)/Colleges etc. attended from age 11	From	To

<u>Secondary Education</u>					
Subject	Level	Grade	Subject	Level	Grade

<u>Further and Higher Education (Including Apprenticeships)</u>		
Name of Establishment	Level	Subject/Trade

<u>Qualifications currently being studied for:</u>		
Name of Establishment	Level	Subject

<u>Professional/ External Training/ Special Courses/ Government Training etc.</u> (continue on a separate sheet if necessary)			
College/Institute	Qualification	Level	Date(s)

<u>Membership of Professional Bodies/ Organisations</u>		
Name of Body	Grade/Level/Position	Registration Date





**General**

Please outline your interests outside work (membership of clubs, organisations, any spare time offices etc.) Include any positions of responsibility held.

Languages spoken and degree of fluency, if applicable

Do you have any unspent criminal convictions? (Declaration subject to the rehabilitation of offenders act 1974) Yes  No   
If yes give details

**References**

Please give details of two referees, one of whom should be your current or most recent employer.  
Have you any objection to your referees being contacted? Yes  No   
If Yes, no contact will be made without your prior permission.

Name/Title	Name/Title
Address	Address
Telephone Number (including STD code)	Telephone Number (including STD code)
E-Mail Address	E-Mail Address
Relationship/Occupation	Relationship/Occupation

**Declaration**

I understand that any offer of employment will be subject to satisfactory references and completion of a medical, the results of which are satisfactory to the Company.

I confirm that the information given on this form is, to the best of my knowledge, true and complete. Any false statement, or essential facts concealed, may be sufficient cause to disqualify my application, or if employed, lead to my dismissal.

Signature \_\_\_\_\_ Date \_\_\_\_\_