

## **Circuit Coatings (Automotive) Limited**



## **Application Form**

Position applied for;			
Full name;			
Address;			
Post Code;			
Telephone number (mobile);			
Telephone number (other);			
Date of birth;			
National insurance number;			
Next of Kin;			
Address (if different);			
Post Code;			
Relatives employed at Circuit C	oatin	gs;	
Please answer all of the below a	s accı	ıratel	y as possible (please tick as appropriate);
Do you have asthma?	Yes	No	Do you have any other health problems?

## Please tick the below as appropriate;

Do you have any skin disease?

Do you have back problems?

Do you smoke or vape?

Are you eligible to work in the UK?	Yes	No
Do you agree to opt out of the working time directive and work OVER 48		No
hours per week?		

Yes

Yes

Yes

No

No

No

If you would like details on how Circuit Coatings (Automotive) Limited use and store your details, a copy of our Candidate Privacy Policy can be found on our website, or you can email; <a href="mailto:sam@circuitcoatings.co.uk">sam@circuitcoatings.co.uk</a> who will forward you a copy.