



**Job Application Form for employment at Savina.**

**APPLICANT INFORMATION**

Surname		First Name		Initial		Date	
Street Address							
Town/City				County		Postcode	
Phone No				E-mail Address			
Date Available				National Insurance No		D.O.B	
Position Applied for							
Are you a UK citizen?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If not, do you have a permit to work in the UK?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?			
Do you have a criminal record?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain			

**EDUCATION**

Secondary Education			Address				
From		To	GCSEs/A-Levels				
College/University			Address				
From		To	Qualifications				
College University			Address				
From		To	Qualifications				

**REFERENCES**

*Please list two professional references.*

Full Name			Relationship				
Company			Phone No (      )				
Address							
Full Name			Relationship				
Company			Phone No (      )				
Address							

**CURRENT EMPLOYMENT (OR LAST)**

Are you currently employed		Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, what are you currently doing? (yes complete section below)			
Company			Phone No (      )				
Address			Supervisor				
Job Title		Starting Salary £			Final Salary £		
Responsibilities							
From		To	Why you wish to leave? Or why did you leave.				
May we contact this employer for a reference				YES <input type="checkbox"/>	NO <input type="checkbox"/>		

**PREVIOUS EMPLOYMENT**

Company		Phone No (     )	
Address		Supervisor	
Job Title	Starting Salary	£	Final Salary     £
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone No (     )	
Address		Supervisor	
Job Title	Starting Salary	£	Final Salary     £
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone No (     )	
Address		Supervisor	
Job Title	Starting Salary	£	Final Salary     £
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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Please complete this application form and either send it to us, or hand it in to us at:-

Savina Mexican Restaurant & Cantina  
 138 Duke Street  
 Liverpool  
 L1 5AG

If you have access to fax, please fax it to our recruitment office on **0870 974 7363**

**\*Note\* A covering letter explaining why you want to work at Savina will enable you to be shortlisted for an interview.**

[www.savinarestaurant.co.uk](http://www.savinarestaurant.co.uk)  
[recruitment@savinarestaurant.co.uk](mailto:recruitment@savinarestaurant.co.uk)