



Employment Application Form

MANNINGUK
73A Reading Road
Henley-on-Thames
Oxfordshire
RG9 1AX

www.manninguk.com
01491 578759

Employment Application Form

A Manning UK Limited 73a Reading Road Henley-on-Thames Oxfordshire RG9 1AX Telephone 01491 578759

Please complete this form as fully as possible for the purposes of our recruitment process.

The information you provide will be treated as Strictly Confidential and will only be accessed by Directors and Managers of the Company

POSITION APPLIED for:

Surname: _____ Forenames _____

Previous Surname: _____

Title Mr Mrs Miss Ms Other _____

Do you have any friends or relations who are employed with ManningUK?

Home Address _____

Yes No

If YES, please give names (Optional)

_____ Postcode _____

How long have you lived at this address _____

Home telephone number _____

Work telephone number _____

Mobile: _____

Email _____

National Insurance Number _____

Next of kin: _____

Relationship: _____

Home address _____

_____ Postcode _____

Contact telephone number _____

Have you made a previous application to ManningUK for employment? Give details:

SKILLS

Typing ability/keyboard skills None Fair Good WPM (if known)

Computer system used: _____ hardware: _____

software _____

PERSONAL DETAILS

Surname _____ First names in full _____

Date of Birth (you are not obliged to complete this question) _____

LEGAL INFORMATION

Have you ever been dismissed from employment or is any such dismissal pending? Yes No

Have you ever had any application/approval/authorisation to transact business in the insurance sector refused or revoked? Yes No

If Yes please provide details _____

Do you own a car Yes No Do you have a full current driving licence Yes No

Is your driving licence free from any convictions Yes No If NO please provide full details including circumstances below:

How many points are there on your licence: _____

It is our policy to complete credit references and criminal record checks where appropriate. Have you ever had any County Court Judgements registered against you? Yes No If yes please give full details:

Have you ever had a Bankruptcy Order made against you or have you ever entered into an Individual Voluntary Agreement with your creditors?

Yes No If Yes please give details _____

Are you currently experiencing any financial difficulties which could result in a CCJ/Bankruptcy being issued against you? Yes No

If Yes please give details _____

Are there any loans outstanding with your previous employers, rail tickets, staff loans/clawback commissions? Yes No If Yes please give full details _____

Have you at any time been convicted of any offence by any court? Yes No If Yes please give full details

These need not be given if the offence or conviction is deemed as spent under the Rehabilitation of Offenders Act 1974

NATIONALITY

ManningUK is committed to providing equal opportunity. Please indicate your Ethnic Origin:

- White
- Indian
- Black Caribbean
- Chinese
- Pakistani
- Black African
- Polish
- Bangladeshi
- Other Black
- Other

Do you need a work permit? Yes No If Yes please give details and dates and include photocopies of all relevant documents

HEALTH QUESTIONS

Has your employment ever been terminated on the grounds of ill health: Yes No If Yes:

If Yes approximately how many days/weeks sickness absence did you have in the last 24 months _____

What is your weight: _____ stone _____ lbs What is your height: _____ feet _____ inches

What is your weekly consumption of alcohol _____ Do you smoke: Yes No

Are you currently taking prescribed medicine: Yes No If Yes how many a day: _____

Are you currently under the care of a doctor or other medical professional: _____

Have you had any periods of hospitalisation or prolonged illness requiring regular medical treatment in the last 10 years Yes No

Are you currently suffering from or have suffered from any of the illnesses listed below:

- | | | | | | |
|---------------------|--|---------------------|--|------------------------|--|
| Heart trouble | Yes <input type="checkbox"/> No <input type="checkbox"/> | Lung Disease | Yes <input type="checkbox"/> No <input type="checkbox"/> | Stomach/bowel trouble | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Jaundice/ hepatitis | Yes <input type="checkbox"/> No <input type="checkbox"/> | Joint Problems | Yes <input type="checkbox"/> No <input type="checkbox"/> | Headaches/migraines | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Diabetes | Yes <input type="checkbox"/> No <input type="checkbox"/> | Allergies | Yes <input type="checkbox"/> No <input type="checkbox"/> | Severe Stress reaction | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Serious Accident | Yes <input type="checkbox"/> No <input type="checkbox"/> | High Blood Pressure | Yes <input type="checkbox"/> No <input type="checkbox"/> | Asthma | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Hernia or rupture | Yes <input type="checkbox"/> No <input type="checkbox"/> | Kidney disorder | Yes <input type="checkbox"/> No <input type="checkbox"/> | Back/neck problems | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Fits/ Blackouts | Yes <input type="checkbox"/> No <input type="checkbox"/> | Epilepsy | Yes <input type="checkbox"/> No <input type="checkbox"/> | Depression | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Anxiety | Yes <input type="checkbox"/> No <input type="checkbox"/> | Hearing problems | Yes <input type="checkbox"/> No <input type="checkbox"/> | Sight problems | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Skin problems | Yes <input type="checkbox"/> No <input type="checkbox"/> | Surgical operations | Yes <input type="checkbox"/> No <input type="checkbox"/> | Mobility problems | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Dyslexia | Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |

ManningUK may wish to send you for a medical examination. A drugs and alcohol test may be carried out. This is a continuing requirement if we feel it is warranted. Do we have your permission Yes No

Name of Previous Employer	Period Held:	Reason for leaving:
	Position Held:	
Address of Employer:	Responsibilities in this position:	
Post Code:		Final Salary £

Name of Current Employer	Period Held:	Reason for leaving:
	Position Held:	
Address of Employer:	Responsibilities in this position:	
Post Code:		Final Salary £

Name of Current Employer	Period Held:	Reason for leaving:
	Position Held:	
Address of Employer:	Responsibilities in this position:	
Post Code:		Final Salary £

Name of Current Employer	Period Held:	Reason for leaving:
	Position Held:	
Address of Employer:	Responsibilities in this position:	
Post Code:		Final Salary £

Please continue on a separate piece of paper if necessary. If any temporary employment through agencies please state.

COMPETENCE LEVEL

Please score your considered currently level of competence in each of the following subject between 1 and 3 with 3

- Level 1 – Basic** - Demonstrates a general understanding of the subject and can apply things learned under supervision.
- Level 2 – Intermediate** - Demonstrates a full understanding of the subject and can apply things learned subject to authority levels and referral procedures.
- Level 3 – Advanced** - A full understanding of the subject and sufficient exposure to demonstrate ability, particularly in identifying when referral may be necessary.

Property and Business Interruption	
Material Damage	
All Risks and Terrorism	
Business Interruption	
Commercial Vehicle	
Fleet	
Liability	
Employers Liability	
Public Liability	
Products Liability	
Pollution Cover	
Financial loss, inefficacy	
Products Guarantee & Recall	
Professional Indemnity & D & O	
Commercial Legal Expenses	
Personal Lines	
Private Car	
Motorcycle	
Commercial Vehicles	
Caravan	
Home	
High Net Worth	
Motor Finance Gap Insurance & ULR	
Crime	
Theft/Money	
Transit	
Goods in Transit	
Marine/Cargo	
Personal Accident and Travel	
Group Personal Accident	
Travel	
Permanent Health Insurance	
Keyman	
Engineering	
Inspection (pressure & Lifting plant)	
All Risks Plant hired in & out	
All Risks Computers	
All Risks Machinery & B/down	
Mach. B/down & Loss of Profits	
Machinery transit/erection	
Contractors and Construction	
All Risks Work in Progress	
All Risks Plant hired in & out	
All Risks Own Plant	
Advance Profits	

REFERENCES

ManningUK will require two employer references one from your current employer and immediately previous employer together with a personal reference. Please supply name and addresses as follows:

Name of Employer	
Address of Employer	
Contact name and title	
Position	
Telephone Number	

Name of Employer	
Address of Employer	
Contact name and title	
Position	
Telephone Number	

Name of Personal Reference	
Address	
Title	
Relationship	
Telephone Number	

ADDITIONAL INFORMATION

ManningUK want to know what you can bring to the business. We will evaluate you and your attributes. All applications will be treated equally, regardless of race, colour, age, disability, sexual orientation, gender or religion.

Any information you may wish to add to support your application e.g. why are you interested in working for ManningUK? Why are you a good applicant?

IMPORTANT INFORMATION AND DECLARATION

ManningUK is required by the Financial Services Authority to ensure that its employees are of good character, competent and able to perform the job they are doing and it is our policy to complete credit references and criminal record checks where appropriate. ManningUK is the data controller regarding all personal data, including sensitive personal data, which you have submitted in connection with your application for employment. This data will be processed for the purpose of employee administration and for selection regarding your application for employment.

By signing below you indicate your explicit consent to ManningUK to process your personal data, including sensitive personal data, for the purpose stated above. You also certify that all the information you have provided within this document is true, complete and accurate and acknowledge that if any information you have provided is incorrect, incomplete, misleading or untrue, this may lead to the withdrawal of any offer of employment or dismissal without notice if you have commenced work. By signing below you also indicate your explicit consent for ManningUK to carry out both a credit reference check and criminal reference check on your behalf.

Signed

Date: