



## Decorating, Glass & Building Centres *Throughout East Anglia*

**BURY ST EDMUNDS**  
 Dettingen Way,  
 Bury St Edmunds,  
 Suffolk IP33 3TX  
 TEL: 01284 762401  
 FAX: 01284 700202

**COLCHESTER**  
 Layer Road,  
 Colchester,  
 Essex CO2 9JY  
 TEL: 01206 216000  
 FAX: 01206 710257

**IPSWICH**  
 Holywells Road,  
 Ipswich, Suffolk  
 IP3 0DL  
 TEL: 01473 217454  
 FAX: 01473 288868

**KIRBY CROSS**  
 Claire Road,  
 Kirby Cross, Essex  
 CO13 0LY  
 TEL: 01255 679161  
 FAX: 01255 851001

**MELTON**  
 Wilford Bridge Spur,  
 Melton, Woodbridge,  
 Suffolk IP12 1RB  
 TEL: 01394 384255  
 FAX: 01394 382312

**NORWICH**  
 Marriott Close,  
 Off Heigham Street,  
 Norwich NR2 4UX  
 TEL: 01603 628973  
 FAX: 01603 667693

**SUDBURY**  
 Martins Road,  
 Sudbury, Suffolk  
 CO10 2FT  
 TEL: 01787 372241  
 FAX: 01787 310960

WEBSITE [www.kentblaxill.co.uk](http://www.kentblaxill.co.uk)

# Job Application Form

Kent Blaxill & Co Ltd is a vibrant family run builder's merchant founded in 1838, with seven branches throughout East Anglia. We have an annual turnover of £26 million p.a. and have seen sales growth in each of the past 5 years. We strive to always provide good customer service to all our customers. We have modernised over the years, however we have not forgotten our core values of service, and good customer and staff relations that has seen us enter our third century. Our staff play a vital role in providing excellent customer service.

Please read the form thoroughly, and then complete it carefully, and in full, in your own handwriting. Please ensure that you complete all sections. Your application will be treated in the strictest confidence.

## CONFIDENTIAL

|                                       |  |         |  |
|---------------------------------------|--|---------|--|
| Position for which you are applying?: |  | Branch: |  |
|---------------------------------------|--|---------|--|

### PERSONAL DETAILS

|  |  |  |        |
|--|--|--|--------|
| Surname:   |  | First Name(s):                           |        |
| Address:   |  |  |        |
|  |  | Post Code                                |        |
| Tel:   |  | Mobile:                                  | email: |
| Emergency Contact:   |  |  |        |
| Address:   |  |  |        |
|  |  | Post Code                                |        |
| Tel:   |  | Mobile:                                  | email: |
| Have you worked for the company before? Y/N                    |  | Have you any relatives working @ KB? Y/N |        |
| If the answer is yes please give details:                      |  |  |        |
|  |  |  |        |
| Are you a member of the Territorial Army or other reserve? Y/N |  |  |        |
| Are you legally entitled to work in the UK? Y/N                |  |  |        |

In line with the Asylum and Immigration Act 1996 we have to ask for proof of your right to work in the UK. Therefore if you are invited to interview please bring with you the original of one of the following; Passport, Work Permit, Certificate of Registration, Naturalisation as a British Citizen. If you are an overseas student, please bring an original work permit.

|   |                   |   |                |
|---|-------------------|---|----------------|
| Do you hold a current UK Driving Licence?: Y/N  |                   | If yes please indicate type of licence: Y/N |                |
| Provisional:  | Motor Cycle Only: | Car:  | LGV/HGV Class: |
| Do you have any current or pending endorsements? Y/N  |                   |   |                |
| If yes, please state number of points and details:  |                   |   |                |
| In the last 5 years have you been involved in any accident whilst driving a lorry, car, forklift etc? Y/N |                   |   |                |
| If yes, please give details:  |                   |   |                |
|   |                   |   |                |

### YOUR HEALTH

|   |  |                              |  |
|---|--|------------------------------|--|
| Have you had any major illnesses/operations?: Y/N                         |  | If yes, please give details: |  |
|   |  |                              |  |
| Have you a history of suspected back complaints?: Y/N                     |  | If yes, please give details: |  |
|   |  |                              |  |
| Have you a medical condition which requires medication or treatment?: Y/N |  |                              |  |
| If yes, please give details:  |  |                              |  |
| Have you had any days off sick in the last three years?: Y/N              |  | How many:                    |  |
| Are you willing to have a medical examination?: Y/N                       |  |                              |  |

### ABSENCE

|  |  |
|--|--|
| Number of days absent from work in the last 5 years (excluding holidays) |  |
|--|--|

### YOUR EDUCATION

| Name of Schools/Colleges/Universities attended | Examinations with Grades & Levels, Technical and/or Professional Qualifications |
|--|---|
|  |   |
|  |   |
|  |   |

### TRAINING

|   |
|---|
| Details of any other training/courses, for example: Forklift, First Aid, Duke of Edinburgh, Customer Service etc: |
|   |
|   |
|   |
|   |



