



Application Form Private & Confidential

Candidate Reference Number:

Date Application Received



Quinn-*Direct* Insurance
 3 Lawnakilla Way,
 Carran Business Park, Enniskillen,
 Co. Fermanagh, BT74 4RZ
 Email: recruit@quinn-direct.com

Personal Details

Title:		Surname:
First name(s):		
Home Address:		Post Code:
Home Telephone Number:		Work Telephone Number:
Mobile Number:		E-mail:
National Insurance Number:		

Education, Qualifications & Training

School/College	Date From/To	Qualifications Gained Please state subjects studied
Name and address of School:		
Name and address of College/University:		
Name and address of College/University:		

Professional Membership and Qualifications:



Using the job criteria supplied please outline the experience you have gained through employment and interests which are relevant to your application for this job:

Job Criteria Supplied	What relevant experience have you gained to meet this criteria?
Job Criteria One:	
Job Criteria Two:	
Job Criteria Three:	
Job Criteria Four:	
Job Criteria Five:	

Use additional sheets and attach if required.



Employment History

Name and address of Employer: Tel. No.: Type of Business	From	To	Salary	Name of Manager
	Job Title: Describe the work you did: Reason for leaving:			
Name and address of Employer: Tel. No.: Type of Business	From	To	Salary	Name of Manager
	Job Title: Describe the work you did: Reason for leaving:			
Name and address of Employer: Tel. No.: Type of Business	From	To	Salary	Name of Manager
	Job Title: Describe the work you did: Reason for leaving:			
Name and address of Employer: Tel. No.: Type of Business	From	To	Salary	Name of Manager
	Job Title: Describe the work you did: Reason for leaving:			

I hereby give permission to contact the employers listed above concerning my prior work experience.

Signature:

Please state whether you have any objection to an approach being made to your present employer.

YES NO

Personal References

Please give details of two people (not relatives) we could approach for a character or employment reference. {Please ensure this information is accurate, as no offer of employment will be made until your references have been contacted.}

Name: Occupation: Address Telephone Number: E-mail address:	Name: Occupation: Address Telephone Number: E-mail address:
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Monitoring Form

Fair Employment (N.Ireland) Act 1989



CANDIDATE REFERENCE NUMBER

This form asks you to provide information from which your perceived religious affiliation can be determined. *The following explains why.*

We are fair employers. We do not discriminate on the grounds of religious belief, political opinion, gender, race, disability or age. We practice quality of opportunity in employment. Most important of all we operate the merit principle; i.e. we select the best person for the job or promotion or opportunity in employment. To do this we need to monitor the perceived religious affiliation of our employees and job applicants. Unless we get this information we cannot show openly that we are fair employers. Therefore we are asking you to help us by indicating the community to which you belong. The information that you are asked to supply will be treated in the strictest confidence and protected from misuse. It will be used only for the purpose of monitoring our equality of opportunity in employment policies. *The terms of the above information are as recommended by the Government.*

Please indicate the community to which you belong by ticking the appropriate box below.

- I am a member of the Roman Catholic community
- I am a member of the Protestant community
- I am a member of neither the Roman Catholic nor the Protestant community

- MALE
- FEMALE

When you have completed this form, please return it with your application in the envelope provided.

Both documents will be separated on receipt.

Thank you for your co-operation.