



Holywell Leisure Centre Canolfan Hamdden Treffynnon

Registered Charity Number 1170729 Rhif Elusen Cofrestredi

Application Form

Position: **Receptionist**

Name:

Address:

Post Code:

Preferred Contact Tel No:

Email:

Please provide details of educational qualifications achieved from GCSE/"O" level onwards.

A large, empty rectangular box with a thin black border, intended for the user to provide details of their educational qualifications from GCSE or "O" level onwards. The box is currently blank.

Please provide details of current employer, existing position, dates employed from and to (present day).

Please also detail current hours and rate of pay, outlining current duties and responsibilities.

A large, empty rectangular box with a thin black border, intended for the user to provide the requested employment details. The box is currently blank.

Previous employment history. Company name with job title including dates from and to, full or part time.

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Please read the job description and person specification and describe how your experience and skills are suited.

A large, empty rectangular box with a thin black border, intended for the applicant to write their response to the question above. The box occupies most of the page below the instruction.

Please provide reference(s). We will only contact these after the successful completion of interview.

1. HR Department of current employer

Name:

Address:

Post Code:

Email:

Tel (mobile if possible):

2. HR Department of previous employer (if with current employer for less than 3 years)

Name:

Address:

Post Code:

Email:

Tel (mobile if possible):

Applicant Name (Print):

Applicant Signature: