



SCOTTISH GLIDING CENTRE

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website: www.scottishglidingcentre.co.uk

Application for Catering Role

PERSONAL DETAILS		
Date:		
Your full name:		
Your address and postcode:		
Telephone numbers:	Home:	Mobile:
Email:		

WHAT DO YOU DO? TELL US ABOUT YOUR CURRENT CATERING ROLE		
Dates:	From:	To:

What does this involve:	
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YOUR EXPERIENCE : TELL US WHAT YOU'VE DONE THAT WOULD BENEFIT THIS ROLE			
Dates from:	To:	Name of employer/business	Main responsibilities

EDUCATION AND QUALIFICATIONS (start with the most recent)

Dates from:	To:	Name of school/college/university	Qualifications gained

OTHER QUALIFICATIONS

Date obtained:	Name of professional body	Qualifications and level

HOBBIES AND INTERESTS

Tell us about yourself.

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Continue here:

OTHER INFORMATION	
Do you have a current driving licence?	
Do you have access to your own transport?	
If appointed, when would you be able to start?:	

REFERENCES

Please give two referees. If in employment, one should be your last employer. Please indicate if you would prefer your referees not to be contacted until after the interview.

Name:	Name:
Address:	Address:
Position held:	Position held:

How did you find out about this vacancy?

SIGNATURE

I confirm that, to the best of my knowledge, everything in this application form is true and correct and can be treated as part of any subsequent contract of employment.

Signature:		Date:	
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Please return this form to:- hello@scottishglidingcentre.co.uk