



Application form

Please complete the form in your own handwriting. Use black ink and answer all the questions

PERSONAL DETAILS

Forename: Last name:
 Address:
 Town: Postcode:
 Telephone: Mobile:
 Date of birth: Current Age: N.I.Number:
 Email:

RESIDENCY

What is your nationality?.....
 Have you lived in the UK/EEA for the last 3 years? Yes No
 If you are married to a UK resident or civil partner have you been a permanent resident in the UK for the past year? Yes No
 How many years have you lived at your current address Years Months

IDENTIFICATION EVIDENCE

If you are invited for interview, please state below which type of I.D evidence you can supply – (please tick)

Passport	Examination certificates
Driving Licence	Bank card/debit card
ID card/other national ID	Home office documents
National Insurance card	Other (please give description of evidence)
Benefits documentation

EMPLOYMENT STATUS

Please indicate your employment status – (please tick)

Employed full time	Employed part time
Self employed	In F/T Education
Unemployed	Other (e.g. retired)
If you are unemployed, what is the reason?	
Redundancy	Other
If you are unemployed please state how long you have been unemployed:	
Less than 6 months	24 - 35 months
6 – 11 months	Over 36 months
12 – 23 months	

Name of last school or college:

QUALIFICATIONS - Please state your highest qualifications				
Qualification type, e.g. GCSE	Subject	Grade	Awarding body	Year awarded

WORK EXPERIENCE WHILST AT SCHOOL OR COLLEGE

EMPLOYMENT HISTORY – most recent/current employer first (paid or voluntary)			
Date From/to	Company	Position held	Brief description of work

WHAT ARE YOUR INTERESTS?

PLEASE TELL US WHY YOU ARE INTERESTED IN JOINING THE FISHING INDUSTRY

YOU MUST ADVISE DETAILS OF TWO REFEREES, WHOM WE MAY CONTACT, (E.G. PREVIOUS EMPLOYER, WORK PLACEMENT, SCHOOL OR COLLEGE – NOT FRIENDS OR FAMILY)

(Please note – failure to provide details of two referees may result in your application not being considered)

Name:	Name:
Position in company/organisation	Position in company/organisation
Address	Address
.....
.....
..... Pcode Pcode
Tel.Number (essential)	Tel.Number (essential)

Where did you find out about this course? Connexions Job Centre

Media (please state) Internet (please state, e.g. web address, Apprenticeship vacancy matching etc.)

Other (please state)

HEALTH

Listed below are aspects of health which can make some work activities difficult. In a few cases it is impossible to do some jobs due to a health problem. Usually though, most jobs are still OK but it does depend upon how serious the problem is. If you have any of the conditions shown below, please tick in the relevant box/boxes.

If you are under 18 you will be required to undertake a medical examination as required by the Merchant Shipping and Fishing Vessels (Health and Safety and Work) (Employment of Young Persons) Regulations, S.I. 1998 No. 2411. Whitby Fishing School requires all learners, regardless of age, to undertake the ENG 1 medical as part of our responsibility for learners' health, safety and welfare.

The information will help us to provide you with the best possible advice on your career options and offer appropriate support to enable you to pursue your chosen career and achieve your aims.

Please tick all that apply

- Hearing
- Speech
- Sight Problems
- Walking / mobility
- Epilepsy
- Claustrophobia
- Back problems
- High Blood pressure
- Blackouts or fainting
- Skin Allergies (e.g. Eczema, dermatitis)
- Mental health / emotional/behavioural difficulties
- Other (please state)
- Have you ever been involved in serious accident or received major surgery? Please state:
- Moderate learning difficulty
- Dyslexia
- Other specific learning difficulty
- Multiple learning difficulties
- Other (please state)
- Colour Vision
- Diabetes
- Migraine
- Standing
- Heart Disease
- Working at heights
- Use of hands and arms
- Arthritis
- Autism spectrum / Aspergers syndrome
- Breathing e.g. (Asthma/Hay fever)

DATA PROTECTION

I understand that this information will be kept confidential by Whitby and District Fishing Industry Training School in accordance with their Data protection Act registration. All personal details held will be made available for my inspection on written request.

APPLICANT DECLARATION

I confirm that the information I have provided on this form is correct. I understand that if I have provided false information Whitby Fishing School reserves the right to refuse interview and/or enrolment. Upon enrolment and during training, should any undisclosed health information become apparent, the school reserves the right to dismiss the apprentice.

APPLICANT SIGNATURE: DATE:

**PLEASE POST THIS APPLICATION FORM TO:
ADMISSIONS
WHITBY & DISTRICT FISHING INDUSTRY TRAINING SCHOOL
WHITBY MISSION & SEAFARERS' CENTRE
HAGGERSGATE, WHITBY YO21 3PP**

EQUAL OPPORTUNITIES
MONITORING

Ethnic Group

WHITE

- WHITE BRITISH WHITE IRISH WHITE GYPSY/IRISH TRAVELLER
- WHITE ANY OTHER

BLACK OR BLACK BRITISH

- CARIBBEAN AFRICAN BLACK OTHER

ASIAN OR ASIAN BRITISH

- INDIAN PAKISTANI BANGLADESHI CHINESE
- ANY OTHER ASIAN

OTHER ETHNIC GROUP

- ARAB ANY OTHER ETHNIC GROUP PLEASE STATE
- PREFER NOT TO SAY

MIXED RACE

- WHITE & ASIAN WHITE & BLACK AFRICAN
- WHITE & BLACK CARIBBEAN OTHER PLEASE STATE

Gender

- MALE FEMALE PREFER NOT TO SAY