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January 2012

Dear Sir / Madam

Thank you for requesting an application pack for the vacancy of  
JETTING/VACUUM UNIT OPERATOR with B P McKeefry Ltd .

Please find enclosed :       (A) Application Form  
  (B) Person Specification  
  (C) Equal Opportunities Monitoring Form

To apply for the post, please forward completed Application Form and Equal  
Opportunities Form

Please post to:

**The Personnel Department  
B P McKeefry Ltd  
114 Grove Road  
Swatragh  
N Ireland  
BT46 5QZ**

Yours faithfully  
B P McKeefry Ltd



Company No: NI 28403

All goods carried are subject to 1996 RHA conditions of carriage





**Application Form** App Ref No :JET/VAC OPERATOR / JAN 12/  
**JETTING /VACUUM UNIT OPERATOR**

Only application forms containing all the information which has been sought on the Application Form will be considered for appointment.

The following will not be accepted: Curriculum Vitae / Attached pages

**PART A**  
**1 Personal details**

Title \_\_\_\_\_ First name \_\_\_\_\_ Last name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Town \_\_\_\_\_ Postcode \_\_\_\_\_

Work telephone number \_\_\_\_\_ Home telephone number \_\_\_\_\_

Mobile tel number \_\_\_\_\_ E-mail address \_\_\_\_\_

Place of Birth \_\_\_\_\_

National Insurance number 

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Nationality 

Citizen of EC country? Yes <input type="checkbox"/> No <input type="checkbox"/>
Non EC: (please state)

**2 LICENCE DETAILS**

**Licence Details**

(If invited to interview you will be required to produce your current driving licence)

Car D.L. No: \_\_\_\_\_ H.G.V. D.L. No: \_\_\_\_\_

Do you have any endorsements, or pending offences? YES / NO

If yes, please give details: \_\_\_\_\_

\_\_\_\_\_

Have you had any accidents in UK or ROI or Continent? YES / NO

If yes, please give details: \_\_\_\_\_

\_\_\_\_\_

Has applicant ever had vehicle insurance in his / her name? YES / NO

What Company issued the policy? \_\_\_\_\_

\_\_\_\_\_

**3 Employment history (start with most recent)**

**Previous Employers (Most Recent First)**

a. Name and Address of Employer: \_\_\_\_\_

\_\_\_\_\_

From (dd/mm/yy) \_\_\_\_\_ To (dd/mm/yy) \_\_\_\_\_

Employed as: \_\_\_\_\_ Duties/Responsibilities of post:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Gross Wages: \_\_\_\_\_ Any other Payments: \_\_\_\_\_

b. Name and Address of Employer: \_\_\_\_\_

From (dd/mm/yy) \_\_\_\_\_ To (dd/mm/yy) \_\_\_\_\_

Employed as: \_\_\_\_\_ Duties/Responsibilities of Post:

Reason for leaving: \_\_\_\_\_

Gross Wages: \_\_\_\_\_ Any other Payments: \_\_\_\_\_

c. Name and Address of Employer: \_\_\_\_\_

From (dd/mm/yy) \_\_\_\_\_ To (dd/mm/yy) \_\_\_\_\_

Employed as: \_\_\_\_\_ Duties/Responsibilities of Post:

Reason for leaving: \_\_\_\_\_

Gross Wages: \_\_\_\_\_ Any other Payments: \_\_\_\_\_

**4 REFERENCES**

Please give the Names and Addresses of 2 people who will provide a reference for you. One reference must be from a current or former employer. References will only be sought when the Company is preparing a job offer.

NAME \_\_\_\_\_ NAME \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
TO APPLICANT TO APPLICANT

If currently employed, what notice would be required if successful? \_\_\_\_\_

Is Applicant prepared to work alternate Saturdays? YES / NO

Is Applicant prepared to work Public Holidays, if required? YES / NO

Is Applicant prepared to undergo one week on the job assessment / training programme?  
YES / NO

(NOTE: SHOULD A DRIVER LEAVE FOR ANY REASON WITHIN THE FIRST SIX MONTHS OF EMPLOYMENT, A DEDUCTION WILL BE MADE FROM THE FINAL WAGES TO REIMBURSE THE INITIAL WEEK'S TRAINING).

## 5 General

Distance from Home to Basingstoke \_\_\_\_\_ Miles \_\_\_\_\_ Time

Distance from Home to Bracknell \_\_\_\_\_ Miles \_\_\_\_\_ Time

Do you have use of a car or access to a form of transport which will enable you to meet the requirement of the post in full if required  Yes  No

## 6 Disability

**Do you have a disability that meets the following definition:**

The Disability Discrimination Act 1995 states that a person has a disability if s/he has a ***'physical or mental impairment which has a substantial or long-term adverse effect on his/her ability to carry out normal day to day activities.'***

Do you meet (or have you in the past, met) this definition?  Yes  No .

If yes, please state what reasonable adjustments, provisions or facilities may be required in the selection process

## 7 Health

Does Applicant suffer from any medical conditions which might affect his / her safety or the safety of others whilst working at heights, operating equipment or driving a vehicle.? (e.g.. dizziness, skin disorder, epilepsy or defective eyesight). YES / NO

If Yes, please give details:

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Is Applicant willing to undergo medical examinations and eye tests as and when necessary? YES / NO

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## 8 Data Protection Act

Please note that the information on this form may be held on record. Strict confidence will be observed and disclosure will only be made for Payroll and Human Resource Administrative procedures. The information may also be disclosed in respect of litigation.

## 9 Convictions

Do you have any convictions for criminal offences or any criminal proceedings pending?  
 Yes  No

If yes, please give full details below. (You need not include motoring convictions unless your driving licence is endorsed or you are currently banned from driving and you need not include any convictions which are 'spent' under the Rehabilitation of Offenders legislation.)

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## 10 Declaration by the applicant

I declare that I have not canvassed in any way and that the information contained in this application is complete and correct to the best of my knowledge. I accept that providing false information or suppressing any information wilfully will make me liable to disqualification, and if appointed to dismissal.

Signature

Date

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**PART B MEETING THE PERSON SPECIFICATION**

Please indicate in the boxes below how you meet the essential and/or desirable criteria. Shortlisting will be based on the information provided in this section

**ESSENTIAL CRITERIA**

<b>TYPE OF WORK UNDERTAKEN</b>	<b>EQUIPMENT USED</b>
<b>OPERATION OF HIGH PRESSURE APPLIANCES</b>	
<b>HEALTH &amp; SAFETY PROCEDURES</b>	

Has Applicant completed any training courses? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## **PART C Monitoring Information**

### **EQUAL OPPORTUNITIES MONITORING QUESTIONNAIRE**

Ref: 

<b>JET/VAC OPERATOR JAN 12/</b>
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1. . Date of birth: .....

2. Gender:     Female     Male

3 . Please tick the box which you feel best describes your ethnicity:

**White:**

- British
- Irish
- Any other White background

**Black or Black British:**

- Black – African
- Black – Caribbean
- Any other Black background

**Asian or Asian British:**

- Asian Bangladeshi
- Asian Indian
- Asian Pakistani
- Any other Asian background

**Dual Heritage:**

- Asian and White
- Black African and White
- Black Caribbean and White
- Chinese and White
  
- Any other background from more than one ethnic group

**Chinese or Chinese British:**

- Chinese
- Any other ethnic group (please give details):

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5. Do you consider yourself to have a disability?

- Yes             No

6. Are there any adjustments or amendments under the Equality Act 2010 which you would need to perform the duties of this role (please refer to job description and person specification)?

- Yes             No

If yes, please explain:

.....

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7. If invited for interview, would you have any individual requirements?

- Yes             No

If yes, please explain:

.....

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**Should you not wish to supply the above information, please tick the following box:**

## **Equal Opportunities Policy Statement**

- 1. The object of this statement is to confirm our aim as an employer to prevent unfair discrimination in our recruitment, selection and employment policies.**
- 2. We recognise that in order to achieve this aim, we must review our procedures regularly to ensure that individuals are selected and employed on the basis of their relevant merits and abilities.**
- 3. The selection and appointment process and the make-up of the workforce will be monitored.**