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Application No		
Interview Offer	Yes / No	
RFR		
Date		

Please indicate your choice:

DECK OFFICER  ENGINEER OFFICER  ELECTRO-TECHNICAL OFFICER

Please indicate from which date you would be available to begin training:

**PERSONAL DETAILS**

Forename		Date of Birth
Surname		Place of Birth
Address		Age
		Nationality
Town/City		Sex
Postcode		Marital Status
Tel		Height
Mobile Tel		Weight
Email		Nearest Airport
Passport No		Nearest Rail Station
Date of Issue	Expiry Date	UK Nat Ins No.

**NEXT OF KIN DETAILS**

Next of Kin	Address
Relationship	
Tel	Postcode

**MARKETING & INTERVIEW**

Where did you first hear about Clyde Marine Training?

Please tick the nearest interview location

Glasgow		London		Southampton		Belfast	
Aberdeen		Fleetwood		Bristol		South Tyneside	
Inverness		Stornoway		Shetland		Orkney	

**SECONDARY SCHOOL / FURTHER EDUCATION**

Name, Address and Tel. No. of last School/College/University attended	Dates From	Dates To

**ACADEMIC QUALIFICATIONS** (Please supply all academic results)

Subject (Add or Delete as Required)	Level (i.e. GCSE)	Year of Examination	Grade or Result (if examination not yet taken please indicate if result is a predicted grade)
<i>Maths</i>			
<i>English</i>			
<i>Physics</i>			
<i>Chemistry</i>			
<i>Double Award Science</i>			

Vocational / University Qualifications	Year of Examination	Grade or Result (or predicted Grade if examination not yet taken)

**HOBBIES / INTERESTS**

Please list any sports or other interests you have and any clubs or societies you are currently involved in or have been a member of. Include any positions of responsibility you have held.

**FURTHER INFORMATION**

Please answer the following questions	YES	NO
Have you ever been arrested/convicted for any offence or crime or have any proceedings pending?	<input type="checkbox"/>	<input type="checkbox"/>
Would you have any objection to obtaining a criminal record check?	<input type="checkbox"/>	<input type="checkbox"/>
If you have answered yes to any of the above please give additional information below		

**CAREER INTEREST**

Please describe briefly below why you wish to pursue a career in the Merchant Navy. What strengths do you have that will help you deal with working alongside multi national crews and being away from home for long periods of time?

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**MEDICAL INFORMATION**

Please answer the following questions	YES	NO
Do you suffer from any hearing or visual impairment including the use of glasses, contact lenses or any form of colour blindness?	<input type="checkbox"/>	<input type="checkbox"/>
Do you suffer from any form of diabetes?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever suffered from any serious illness?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever suffered from asthma?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever suffered from blackouts or epilepsy?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever suffered or currently suffer from any allergies?	<input type="checkbox"/>	<input type="checkbox"/>
Have you had any operations in the last 5 years?	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently taking any form of prescribed medication?	<input type="checkbox"/>	<input type="checkbox"/>
If you have answered yes to any of the above please list details below		

**WORK EXPERIENCE / CURRENT EMPLOYMENT**

Please detail any work experience and/or current employment				
Name of Company or Organisation	Position Held	Start Date	End Date	Reason for leaving
Notice period required				

**REFERENCES**

Please provide the names, addresses and telephone numbers of two persons that we may contact now for a reference. If you are currently in education one of these must be the principal, headmaster or guidance teacher of the educational facility.

Company/College/School name:	Company/College/School name:
Name of Referee:	Name of Referee:
Address:	Address:
Postcode:	Postcode:
Tel:	Tel:
Position/Relationship:	Position/Relationship:
Email:	Email:

**DECLARATION**

I declare that to the best of my knowledge the information on this application is true. I understand that if the information I have supplied is false or misleading in any way, I will automatically be disqualified from appointment or dismissed without notice.

Signature

Date:

**DATA PROTECTION ACT**

Under the terms of the Data Protection Act the information provided on this form will be held in confidence, used for the purpose of recruitment, selection, personnel administration/monitoring only. If you do not wish for your details to be used for this purpose please tick the box.

**FOR OFFICE USE ONLY**

<i>Accept for Interview</i>	<i>Confirmed Area for Interview</i>
<i>RFR</i>	<i>Notes</i>
<i>Suggested College</i>	<i>Likely Course</i>
<i>Checked By</i>	<i>Date Application Viewed</i>

**POST INTERVIEW**

<i>Interview Date</i>	<i>Confirmed College</i>
<i>Interview Score</i>	<i>Course</i> <i>BSc PGrad FD/PD HND HNC</i>
<i>Interviewed By</i>	<i>Starting Date</i>
<i>Sponsorship Offer</i> <i>YES NO</i>	<i>Offer Subject To</i>
<i>Route</i> <i>Deck Eng ETO</i>	