



MDL MARINAS

MARINA DEVELOPMENTS LTD

Application for Seasonal Employment

Please complete in black ink and in CAPITAL LETTERS

RECRUITMENT POLICY

It is the company's policy to employ the best qualified personnel and provide equal opportunity for the advancement of employees including promotion and training and not to discriminate against any person because of sex, race, pregnancy, disability, marital or family status, age, sexual orientation, religious beliefs or trade union memberships.

POSITION APPLIED FOR: Seasonal Team Member

PERSONAL DETAILS

Surname: []

Mr/Mrs/Miss/Ms/Title: []

Forenames: []

Address: []

Email: []

[]

Contact Telephone: []

Postcode: []

NI Number: []

Do you need a work permit to work in the UK? YES NO (please tick as appropriate)

Do you hold a Full UK driving Licence: YES NO (please tick as appropriate)

Have you been convicted of any criminal offences which are not yet spend under the Rehabilitation of Offenders Act 1974?

YES NO (please tick as appropriate) If Yes, please explain

[]

Where did you hear about this vacancy? (please tick appropriate) MDL Website Facebook LinkedIn Other

If Other, please state where [].....

Have you ever applied to, or been employed by this company? YES NO (please tick as appropriate)

If so, when? [].....where? [].....

Do you have relatives employed by this Company? YES NO (please tick as appropriate)

If so, please name them here [].....

Date you will be available to work from [].....

Months you will be available to work: April May June July August September (please tick as appropriate)

Please detail your availability for work e.g. days of the week, daily hours and maximum hours per week [].....

.....

Which Marina(s) do you want to work at? (please tick as appropriate)

Bray Brixham Chatham Dartside Quay Cobb's Quay Hamble Point Hythe Mercury Yacht Harbour

Northney Ocean Village Penton Hook Port Hamble Queen Anne's Battery Saxon Wharf Shamrock Quay

Sparkes Torquay Windsor Woolverstone

Are you registered disabled? YES NO (please tick as appropriate)

If yes, please give details of any reasonable adjustments you would consider necessary to during this recruitment phase.

[].....

Please tick the box which best describes your ability to swim: Strong Satisfactory Poor Can't swim

(please tick as appropriate)

PREVIOUS EMPLOYMENT - LIST PRESENT EMPLOYMENT FIRST		
NAME AND ADDRESS OF COMPANY []		Tel. No. []
Type of Business: []	Position held: []	
Brief description of duties: []		
Period of employment: []	from: []	to: []
Salary starting: []	Leaving salary: []	Other benefits: []
Reason for leaving or wishing to leave:	[]	

NAME AND ADDRESS OF COMPANY []		Tel. No. []
Type of Business: []	Position held: []	
Brief description of duties: []		
Period of employment: []	from: []	to: []
Salary starting: []	Leaving salary: []	Other benefits: []
Reason for leaving or wishing to leave:	[]	

NAME AND ADDRESS OF COMPANY []		Tel. No. []
Type of Business: []	Position held: []	
Brief description of duties: []		
Period of employment: []	from: []	to: []
Salary starting: []	Leaving salary: []	Other benefits: []
Reason for leaving or wishing to leave:	[]	

EDUCATION (inc. further education)	
School/College/University detail	Examinations passed (state grades)

SPECIALISED TRAINING OR OTHER RELEVANT WORK EXPERIENCE INCLUDING VOLUNTARY WORK
Details of any courses or training relevant to this position

GENERAL
If offered this position, will you continue to work in any other capacity? <i>(Give details)</i>

In order to submit your application successfully, you must include a video of you answering the following three questions: -

1. What attracted you to apply for the role of a Seasonal member of our team?
2. Explain a time where you have delivered or experienced exceptional customer service.
3. Outline any previous experience (preferably work experience) that you have that you believe is relevant to your application.

You video should be no longer 3 minutes long (1 minute to answer each question).

Please tick to indicate you have included your video with your application form:

Please note, in order for you to be considered for the position, you must submit both a completed application form and your video answering all three questions. Failure to do so, may result in your application being rejected.

APPLICANT DECLARATION

I authorise the company to obtain references to support this application once an offer has been made and accepted and release the company and referees from any liability caused by giving and receiving information.

Please tick this box if you consent to the company holding your application on file should you be unsuccessful in securing this position in order to be considered for any other suitable vacancies

Declaration: I confirm that the information given on this form is, to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection or, if employed, dismissal.

Signature: _____ Date: _____

Please send your completed application form and 3 minutes video to careers@mdlmarinas.co.uk