



## WEC Group - Application Form

This application form was created to streamline your interview process with us, please take your time to fill this out before your interview.

\* Required

### General Questionnaire

1. First Name: \*

2. Last Name: \*

3. Date of Birth: \*

4. Email Address: \*

5. Contact Number: \*

6. Full Address: \*

7. Do you have the right to live and work within the UK \*

Yes

No

8. Please provide details on your right to work status (e.g. Visa Status, national, ancestry history):

\*

9. Due to the nature of some of our customer contracts, the vacancy you have applied for is exempt from certain areas of the Rehabilitation of Offenders Act 1974. Therefore you are required to disclose all and any past or pending cautions or convictions. All information provided will be kept in the strictest confidence and only used for the purpose of assessing your suitability for the vacancy.

Please specify below whether you have had a past or pending caution or conviction: \*

Yes

No

10. If yes, please provide more details on the Caution or Conviction: \*

11. Do you hold a Full UK Drivers License: \*

Yes

No

12. If yes, what type of vehicles are you eligible to drive: \*

Cars

Motorcycles

Mopeds

Medium Sized Vehicles

Large Vehicles

Buses

## Vacancy Details

13. What role are you applying for: \*

14. How did you hear about this position: \*

- Company Website
- Job Board (Indeed, CV Library, Glassdoor etc)
- Social Media
- LinkedIn
- From a Friend or Relative
- Referred by a WEC Employee

15. What is your Salary expectations: \*

16. What is your notice period: \*

## Details of Present/Previous Employees

17. Current/Most Recent Employer \*

18. Current Salary: \*

19. Job Title: \*

20. Job Responsibilities: \*

21. Work Location (Office based, Hybrid, Remote): \*

22. Date Started & Date left (If still there put Present) \*

23. Reason for Leaving \*

24. Name of Previous Employer:

25. Job Title:

26. Job Responsibilities:

27. Work Location (Office based, Hybrid, Remote):

28. Date Started & Date left:

29. Reason for Leaving:

30. Name of Previous Employer:

31. Job Title:

32. Job Responsibilities:

33. Work Location (Office based, Hybrid, Remote):

34. Date Started & Date left:

35. Reason for Leaving:

## Educations & Qualifications

36. Places of Study (Provide details of any High School, College or University you attended) \*

37. Subject/Qualifications Achieved: \*

38. Any additional Skills/Qualifications:

39. What are your hobbies/interests outside of work: \*

## Health & Safety Questionnaire

40. The WEC Group has zero tolerance towards drugs and alcohol. Therefore we operate a random Drugs & Alcohol testing policy.

Are you prepared to accept this policy? \*

Yes

No

41. As the drugs and alcohol tests are random is there anything you wish to disclose about your drug and/ or alcohol intake that may have an affect on any test carried out: \*

Yes

No

42. If yes, please provide more details: \*

43. The Health & Safety of our Employees is our utmost priority. Whilst we take all precautions necessary to mitigate risks and make the workplace as safe as possible, it still remains a hazardous environment.

Please now disclose any personal circumstances, or medical conditions, that could adversely affect the safety of yourself, and that of your colleagues - e.g. Conditions that could make operating machinery dangerous, working at height, enclosed spaces etc.

If you have no mitigating circumstances or medical conditions please answer N/A \*

44. Following the question above, do you take any Medication that may affect your ability and/or safety to perform the job tasks you have applied for

If you aren't currently taking any medication then please answer N/A \*

45. Have you had any periods of absence in the last 12 months: \*

Yes

No

46. If yes, please give more details: \*

47. Do you belong to any professional bodies or Trade Unions \*

Yes

No

48. If yes, please give more details: \*

49. Have you ever had an Industrial claim from any previous employer: \*

Yes

No

50. If yes, please give more details: \*

51. Are you willing to take full responsibility for your own Health & safety whilst at work: \*

Yes

No

52. Are you willing to adhere to the company's Health & Safety rules at all times: \*

Yes

No



53. Are you a registered First Aider or Fire Marshall: \*

- Yes to both
- No to both
- Fire Marshall
- First Aider

## References

54. Name of Referee: \*

55. Company name: \*

56. Job Title: \*

57. Email Address: \*

58. Contact Number:

59. Name of Referee: \*

60. Company name: \*

61. Job Title: \*

62. Email Address: \*

63. Contact Number:

## Diversity Questionnaire

Here at the WEC Group, we pride ourselves on providing the best solutions for our customers. We are therefore committed to having a diverse workplace/culture in our company to increase the contribution from people with varying backgrounds. To understand and measure the positive impact we are making towards this, we need to collect the following data. The Diversity Questionnaire will NOT be considered in the selection process and will be completely confidential and anonymous

64. What is your Legal Sex: \*

- Man
- Woman
- Prefer not to say

65. What is your Gender Identity: \*

- Man
- Woman
- Non-binary
- Prefer not to say
- I use another term

66. What is your Sexual Orientation: \*

- Heterosexual/Straight
- Gay/Lesbian
- Bi or Bisexual
- I use another term
- Prefer not to say

67. How would you describe your Cultural and Ethnic origin: \*

- White - English
- White - Scottish
- White - Welsh
- White - Irish
- White - Northern Irish
- White - Gypsy or Irish Traveller
- Other White Background
- Black or Black British - Caribbean
- Black or Black British - African
- Other Black Background
- Asian or Asian British - Indian
- Asian or Asian British - Pakistani
- Asian or Asian British - Bangladeshi
- Chinese
- Other Asian Background
- Indian
- Mixed - White and Black Caribbean
- Mixed - White and Black African
- Mixed - White and Asian
- Other Mixed Background
- Other - Arab
- Other Ethnic background
- Not known
- Prefer not to say

68. What is your religion/belief system \*

- Agnostic
- Atheist
- Buddhism
- Catholicism
- Christianity
- Hinduism
- Islam
- Judaism
- Orthodox Church
- Protestant
- Sikhism
- Not Stated
- Prefer not to say

69. What is your nationality:

70. What is Your Marital Status: \*

- Civil Partnership
- Co-habiting
- Divorced
- Married
- Separated
- Single
- Widowed
- Prefer not to say

71. Do you have a Disability, as defined by the Equality Act 2010 \*

- Dyslexia
- Hearing difficulties
- Learning Disability
- Long-term Condition (Chronic pain, diabetes, epilepsy etc)
- Mental Health conditions (Depression, Anxiety, Trauma etc)
- Physical or Mobility
- Speech
- Visual
- Other
- No, I dont have nay disabilities

72. If you ticked any of the above, please explain more details: \*

## Data Release

73. By selecting 'Yes' below you are agreeing that your application document and the information provided by you can be stored for the next 12 months after completion of this form so that you can receive future contact about any other suitable positions the WEC Group may deem suitable. You have the option to remove your consent at any point before the 12 month period by sending an email to [recruitment@wecl.co.uk](mailto:recruitment@wecl.co.uk) \*

Yes, I agree

No, I dont agree

## Declaration

Please read carefully

74. By submitting this form, I declare that all the information I have provided in this form, to the best of my knowledge, is true. I understand that if it is discovered that any statement is misleading or False, or that I have withheld information, my application may be disqualified or if already appointed, be at risk of dismissal

---

This content is neither created nor endorsed by Microsoft. The data you submit will be sent to the form owner.

 Microsoft Forms