



Cashel Farmhouse Cheese Makers

Employment History (Please complete and use a separate sheet if necessary)

From: **To:** **Name and Address of Employer**

Job Title: _____ **Rate of Pay/Salary** _____

Duties & Responsibilities:

From: **To:** **Name and Address of Employer**

Job Title: _____ **Rate of Pay/Salary** _____

Duties & Responsibilities:

From: **To:** **Name and Address of Employer**

Job Title: _____ **Rate of Pay/Salary** _____

Duties & Responsibilities:



Cashel Farmhouse Cheese Makers

From: **To:** **Name and Address of Employer**

Job Title: _____ **Rate of Pay/Salary** _____

Duties & Responsibilities:

From: **To:** **Name and Address of Employer**

Job Title: _____ **Rate of Pay/Salary** _____

Duties & Responsibilities:

From: **To:** **Name and Address of Employer**

Job Title: _____ **Rate of Pay/Salary** _____

Duties & Responsibilities:

Please give the names and addresses of two persons from whom we may obtain both character and work experience references.

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |



Cashel Farmhouse Cheese Makers

(please state known in capacity of?)

Health Details:

Please list any diseases, disorders, allergies, muscular or musculo skeletal injuries from which you have suffered or do suffer?

Please list any absences from work in the past 12 months and reasons for such absences?

Other Information

Criminal Record: Please note any criminal convictions except those spend under the Criminal Justice Act of 2011. If none please state.

Current Driving Licence –

Do you hold a current driving licence ?

Date of expiry?

Details of endorsements?

Are there any restrictions of you taking up employment in the state?

If yes please give details



Cashel Farmhouse Cheese Makers

Declaration

1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. I agree that the organisation reserves the right to require me to undergo a medical examination (should we require further information and wish to contact your doctor with a view to obtaining a medical report. The law requires us to inform you of our intention to obtain your permission prior to contacting your doctor

Signed: _____ Date: _____

Please return the completed application form along with a letter of application highlighting:

- 1) What attracts you to apply for this position
- 2) Why you think you are a suitable candidate for this position

Please return to: jobs@cashelblue.com