

## **JOB APPLICATION FORM**

\*Please submit your current CV with this form

Post applied for:	Start date:	
Referee Full Name:	Department:	

## **CONFIDENTIAL**

## **PERSONAL DETAILS:**

Title:	Surname:			Firstname		
Address:			Tel No: (home)		•	
		Tel No: (mobile):				
Post Code:		Email:				
Nationality:						
Do you need a Isle of Man?	work permit to be empl	oyed in the	☐ Yes ☐ No			
If you answere option that ap	ed No to the above, pleas	e choose the	☐ Not applicable			
	p ,		☐ No I an	n classed as an "Isle	of Man Worker"	
			☐ I have/v	vill have an "Immigr	ation Employment Docum	ent"
			My spouse, civil partner or cohabiting partner holds a full, Isle of Man issued work permit			
		My spouse, civil partner or cohabiting partner is working in a role exempt from Isle of Man work permit requirements				
			This role is exempt from Isle of man work permit requirements			
Would you require a Visa for this role?			□ No – I am an IOM/UK/Irish national			
			☐ No − I have Indefinite Leave to Remain			
			☐ No − I have a family, spousal, fiancé or civil partner Visa			
		No – I hold EU Settlement Scheme status (Applies to all EU nationals who have resided in the UK/IOM prior to 01/01/2021)				
		Yes – I require a Visa (Applies to all non-EU, EEA & Swiss citizens AND all EU applicants who have never resided in the UK/IOM from 01/01/2021)				
Do you hold a clean driving licence?			Yes		] No	
Do you have a	ccess to a vehicle?			Yes		] No
Preferred wor	king arrangements:	☐ Full-tim	e	Part-time		] Casual

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Please give details of Educational or Training Courses/Qualifications (e.g. Food Hygiene Certificates, First Aid Certificates etc.)					
RELEVANT SKILLS, ABILITIES, KNOWLEDGE, EXPERIENCE AND REASONS FOR APPLYING	FOR THIS J	ОВ:			
What attracts you to work at Comis Hotel & Golf Resort?					
Why have you applied for this role and what relevant skills do you possess?					
Please give an example of when you have provided 'excellent Customer Service'					
Please provide any additional information that you feel will support your application					
OTHER INFORMATION (if yes, please furnish details):					
Are you currently the subject of any criminal proceedings? Have you ever been convicted of a criminal offence in the Isle of Man or elsewhere which are not considered spent for the purposes of the proposed employment?	Yes	☐ No			
Have you ever made a composition with your creditors or been adjudicated bankrupt?	Yes	☐ No			
Have you ever had a civil judgment for debt or taxes or rates made against you?	Yes	☐ No			
Have you ever had any findings of professional misconduct made against you for work?	Yes	☐ No			
Is there any additional information which should be provided which may call into question whether it is appropriate for you to be appointed to this office?	Yes	☐ No			
* If 'Yes' to any of the above please provide further information below. (A conviction which is treated as provisions of the Island's Rehabilitation of Offenders Act 2001, need not be disclosed in answer to this convictions of the Island's Rehabilitation of Offenders Act 2001, need not be disclosed in answer to this conviction which is treated as provisions of the Island's Rehabilitation of Offenders Act 2001, need not be disclosed in answer to this conviction which is treated as provisions of the Island's Rehabilitation of Offenders Act 2001, need not be disclosed in answer to this conviction which is treated as provisions of the Island's Rehabilitation of Offenders Act 2001, need not be disclosed in answer to this conviction.		rthe			

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I declare that the information given in this applicatio misleading information on this form or made any om under Gross Misconduct.  Signature:  Full Name (Block Capitals)	nissions, this will be suffic		
misleading information on this form or made any om under Gross Misconduct.	nissions, this will be suffic	cient grounds for terminati	
misleading information on this form or made any om			
ECLARATION:			
*If 'Yes' please give brief details of the effects of you you feel would help us to accommodate your needs (Equality Act 2017:			
	arrangements to be	☐ Yes*	☐ No
<b>Disabilities:</b> If selected for interview, do you require any special a made on account of a disability?	arrangements to he		



## REFERENCE CHECKING CONSENT AND AUTHORIZATON

Candidate Full	Name:		Si	gnature:		
I, the undersigned, authorize and consent Comis Hotel & Golf Resort/Comis Holdings Limited or any agencies acting on its behalf, to make inquiries, collect and use personal information concerning my current and past employment for the purpose of assessing my application for employment with Comis Hotel & Golf Resort/Comis Holdings Limited.						
I understand that if I am successful, this information will be retained in my personnel file within the Human Resources Office and disposed of according to the policy on personnel file retention and disposal.						
I understand that reference information may include, but not be limited to, verbal and written inquiries or information about my employment performance, professional demeanor and character, rehire potential, dates of employment, salary and employment history.						
By providing such authorization, I understand and agree that I release Comis Hotel & Golf Resort/Comis Holdings Limited from any and all claims or potential claims I may have regarding any and all information released to or by Comis Hotel & Golf Resort and regarding my employment decisions made about me on the basis of such information.						
Please provide two referees in support of your application, one of which must be your most recent/current line manager.						
REFEREE 1:			REFEREE 2:			
Full Name:			Full Name:			
Job Title:			Job Title:			
Organisation:			Organisation:			
Address:			Address:			
Post Code:			Post Code:			
Tel No:			Tel No:			
Corporate E- mail address:			Corporate E- mail address:			
Do you give peri request this refe of employment	erence if an offer	Yes No	request this re	rmission for us to ference if an offer t is made to you	Yes	☐ No

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