



Please return the completed application form via email: careers@monaghan-mushrooms.com

APPLICATION FORM

Please complete this form as accurately as possible. If you do not complete all sections of the form the application may not be considered.

All information given will be treated with the strictest confidence.

DECLARATION

I declare that the information given by me in this form is, to the best of my knowledge and belief, true and accurate in every detail. I understand that if, found to have suppressed any material facts or to have given false answers I will be liable to disqualification from the application process or, if appointed, to dismissal.

Date: _____ Signature: _____

THE VACANCY

Position applied for: _____

Job reference number: _____

Preferred site / location: _____

What type of contract are you interested in?

Permanent	<input type="checkbox"/>	Temporary	<input type="checkbox"/>
Full-time	<input type="checkbox"/>	Part-time	<input type="checkbox"/>

When are you available for work / notice period? _____

How did you hear about us? _____

PERSONAL DETAILS

Title (Dr/Mr/Mrs/Ms): _____

First name: _____

Surname: _____

Address: _____

Postcode: _____

Telephone number: _____

Email: _____

Applications with no email address will **not** be considered!

GENERAL INFORMATION

Do you have a clean driving license? Yes No

If yes please specify the type of license: _____

Do you own / have access to a car? Yes No

Do you require VISA or Permit to work in EU? Yes No

Do you require VISA or Permit to work in Canada? Yes No

WORK EXPERIENCE

Please provide details of your previous work experience which you consider relevant to your application.

Date started	Date ended	Name and address of the company (employer)	Position held (Give a brief description of the duties)

Have you been employed by Monaghan Mushrooms Group in the past? Yes No

EDUCATION

Name of school, institute or university	Qualification and subject	Date awarded

LANGUAGE SKILLS

Language	Native	Fluent	Conversational	Basic

ADDITIONAL INFORMATION

Please use this space to provide any additional information which you consider relevant to your application. This may include: technical skills, training, voluntary work or leisure interests.

REFERENCES

Please provide details of two business referees (e.g. managers) who we have permission to contact.

Full name	Company and their position	Telephone number	Email address