



Application Form for Apprenticeships

Please ensure that you complete this application form carefully, answering all the questions and giving as much information as possible. This will help us to ensure that your application receives full and fair consideration. Please note CVs will only be considered in addition to a fully completed application form, and not instead of. Applications received after the closing date will not normally be considered.

What role are you applying for? _____

1. Tell us about yourself:

Title: _____ Address: _____
Forename (s): _____
Surname: _____
Email: _____ Post Code _____
Home Telephone No. _____ Mobile No. _____

Can you swim at least 25m unaided? Yes/No

2. Education History

School/College	Subject (s) studied	Date Achieved	Qualification and level gained

3. Please state any other qualifications or training you have undertaken

4. Work Experience/History?

Please include any work experience, periods of voluntary work or part completed apprenticeships.

Employer	Type of Work	From Date	To Date	Voluntary work? Yes or No

Please list any other relevant roles on a separate sheet

5. How did you hear about this position?

Please tick appropriate box

PLA Website Through a friend Facebook

Other (please state) _____

6. Why do you want to be an apprentice at The Port of London Authority?

8. What personal skills would you like to improve?

9. Is there anything we can do to help you at interview?

10. What do you do for fun?

What are your hobbies, interests or achievements?

11. I declare...

... that the information contained in this application form is correct and true. I understand that if it is subsequently found that any statements are false or misleading, my application may be disqualified.

Signed _____ Date _____

Please return the application form to:

The Human Resources Department
Port of London Authority
London River House
Royal Pier Road
Gravesend
Kent
DA12 2BG

Or alternatively email a copy of this application to apprentices@pla.co.uk

12. Dedicated to equal opportunities (and you)

This form must be completed on a separate sheet.

The Port of London Authority will not discriminate either directly or indirectly because of race, sex, sexual orientation, gender reassignment, religion or belief, marital or civil partnership status, age, disability, or pregnancy and maternity.

We would, therefore, be grateful if you would complete and return the questionnaire below with your application form. All information will be treated in confidence and will not be seen by staff directly involved in the appointment. The questionnaire will be detached from your application form, stored separately and used only to provide statistics for monitoring purposes. Thank you for your assistance.

Role applied for _____

Title _____

Surname _____

Forename (s) _____

Date of Birth _____

Sex: Male Female

Do you have any disabilities? Yes No

Ethnic Origin

(Relates to a sense of identity/ belonging on the basis of race/ culture)

I would describe myself as (choose ONE section from A to E, and then tick the appropriate box to indicate your cultural background):

A White:			
British		Scottish	
English		Welsh	
Irish		Other, please specify:	
B Mixed:			
White and Black Caribbean		White and Asian	
White and Black African		Other, please specify:	
C Asian, Asian British, Asian English, Asian Scottish or Asian Welsh:			
Indian		Bangladeshi	
Pakistani		Other, please specify:	
D. Black, Black British, Black English, Black Scottish, or Black Welsh:			
Caribbean		Other, please specify:	
African			
E Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh, or other ethnic group:			
Chinese		Other, please specify:	
F Other, please specify:			