



Please return your completed application form to:

The Recruitment Co-ordinator
Monarch Airlines Limited
London Luton Airport
Bedfordshire LU2 9NU

Monarch Application Form

Reference Number
For Company use only

Applicant Number
For Company use only

Position applied for _____

Have you ever held or applied for employment with this Company? If yes, please give details _____

Have you any relatives or friends employed by this Company? If yes, please give details _____

personal details

Title (Mr/Mrs/Miss/Ms) _____

Telephone numbers: _____

Surname _____

(Private) _____

Forenames _____

(Business) _____

Address _____

(Mobile) _____

Post Code _____

E-mail address _____

Are you legally eligible for employment in the UK?
YES / NO

National Insurance
Number: _____

Do you possess a full UK Driving Licence?

Yes No Number _____

NB if offered employment a copy of your driving licence will required for monitoring purposes

Professional qualifications (including Licences and Approvals, Accountancy, Secretarial, etc):

Present or most recent employment

Present/most recent employer	Period From To		State position(s) held, duties and main responsibilities	Salary (including benefits)
Company name: Address: Tel No:				

Period of notice required

Earliest start date

Reason for seeking new employment

Previous employment

Previous employer(s) Please state name of company, address and contact person	Period		State position(s) held, duties and main responsibilities	Salary (including benefits)
	From	To		

Breaks in employment. **(Please explain any breaks of more than one week in your employment history).**

For company use

Interviewed by: _____ Interview Date: _____

Interview comments

For letter of appointment
(Please complete all details)

Start date: _____ Length of lunch break: _____

Department: _____ Overtime entitlement: Yes No

Cost code: _____ Allowances: _____

Job title: _____ Additional remarks: _____

Grade: _____

Salary: _____ State shift pattern (where applicable): _____

Probationary period: _____ Signatures: _____

Bonding Agreement required? YES NO Manager: _____

Exact Days & hours of work: _____ Director: _____

No of hours per week _____

MAEL ONLY – Signature of Managing Director: _____ Date: _____