



# Self-employed Operator Application Form 2008/2009

*(Please complete form in block capitals)*  
**Section One – Personal Details**

Full name \_\_\_\_\_

Other or preferred name used? \_\_\_\_\_

Title: Mr, Mrs, Miss, Other.....(Please circle)

Address (please include your postcode)

\_\_\_\_\_

\_\_\_\_\_

Post Code \_\_\_\_\_ Country \_\_\_\_\_

Gender \_\_\_\_\_ Marital Status \_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_ Current age \_\_\_\_\_

Territory Manager(TM) \_\_\_\_\_

\*Email Address \_\_\_\_\_

\* Please note your weekly commission statements will be sent by email automatically to this email address unless you tick this box

Telephone Number (Home) \_\_\_\_\_

Telephone Number (Business) \_\_\_\_\_

Mobile Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Nationality \_\_\_\_\_

NI Number  
\_\_\_\_\_

Passport Number  
\_\_\_\_\_

**How did you hear of Calendar Club?** Daltons / Agent Base / Existing operator / other please list

Would you be able to run more than one store if requested to? YES/NO  
Please list in order of preference up to three towns in which you would like to operate a Calendar Club store:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Do you have any medical condition that that may limit the type of work you can do? YES / NO  
If yes please give full details,

.....  
.....

Calendar Club trades for seven days a week during the busy season, from early morning until late in the evening– with this in mind are there any times when you will be unable to work?

If yes please give full details, YES / NO

.....  
.....

How do you intend staffing your store? (Yourself plus staff or with family members?)

.....  
.....

Are you able to work during school holidays? YES / NO

Are you able to work at weekends? YES / NO

Are you able to start at very short notice? YES / NO

## Section Two – Employment History

Please give details of your employment history starting with the most recent position first.

Dates from/to	Employer name and address	Job title, duties and responsibilities	Reason for leaving

## Section Three – Work Related Training

Please give details and dates of any job related training you have completed.

## Section Four – Supporting Information

Please use this section or a covering letter to give further information in support of your application. Please include why you are applying for the position, what you hope to achieve by becoming a Calendar Club operator and how your experience and personal qualities would be of benefit to Calendar Club.

*Have you ever been convicted of a criminal offence that is not 'spent' under the Rehabilitation of Offenders Act 1974?* YES / NO  
*If yes please give full details below,*

.....  
.....

*Do you have any prosecutions pending against you?* YES/NO  
*If yes please give full details below,*

.....  
.....  
.....

***Please ensure that all sections are fully complete before signing your original signature below.  
Note: Applications will not be processed if they are not fully completed and originally signed.***

*I certify that the information I have given is true and accurate to the best of my knowledge.*

PLEASE SIGN.....PRINT NAME.....  
DATE.....

\* Calendar Club reserves the right to apply for credit references. \*