



About this form

This form can be filled in digitally with Adobe Acrobat. If you don't have it, it can be downloaded from <https://get.adobe.com/uk/reader/> Alternatively, you can print off the form, fill it out and send it back to us. Fields marked with an asterisk* are required.

When completed, please save it and email it to enquiries@yprentis.co.uk

Section 1

Personal details

Title*

First name*

Middle name(s)

Last name*

Gender*

Date of birth*

Address line 1*

Town/city*

County*

Post code*

Telephone number (home)

Telephone number (mobile)*

Email address*

NI number*

Where did you hear about us?

Next page



Section 2

About you

Please select which trade you are applying to*

We always try our best to place our apprentices close to home.

Are you willing to travel within a reasonable distance?* Yes No

Can you drive?* Yes No

If yes, please provide your driving licence number

Do you have your own transport?* Yes No

Why have you chosen a career in construction?

Do you have any previous construction-based experience?* Yes No

If yes, please give a brief description of what you did

What skills and qualities can you bring to this position?



Section 3

Education

Are you in full time education?*	Yes	No
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If yes, please provide details

If no, when did you leave full time education?

Name of last school/college attended

Address

To become an Y Prentis apprentice you don't need to have any specific qualifications, but it does help to have certain qualifications. Please answer the following questions, providing as much detail as possible.

Do you have a GCSE in: Maths*	Yes	No	English*	Yes	No
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If you have taken any exams at school or college, please state the subject and the qualification obtained below:

Subject	Level (GCSE/A-level etc)	Grade	Date obtained



Section 4

Equal opportunities

We're committed to taking positive steps to combat discrimination, and regularly monitor our performance to ensure that equality of opportunity is maintained. This information will be treated as strictly confidential and will only be used to monitor the effectiveness of our equal opportunities policies. This information will not be used to inform any selection decision.

White – Welsh	Indian
White – British	Pakistani
White – other	Bangladeshi
African	Chinese
Caribbean	Mixed – other
White and Black Caribbean	Other
White and Black African	Prefer not to say
White and Asian	

Do you consider yourself to have a disability?* **Yes** **No**

If yes, please give details of any assistance you would require as an apprentice

Are you affected by any of the following:

Blind/partially sighted	Dyslexia
Deaf/hearing impaired	Mental health disability
Colour blindness	Mobility difficulty
Allergies	Other

I declare that the information I've given on this form is correct and complete where necessary.

Type your name or sign*

Date*