



Application Form

Answer all questions - Please print in applicant's own handwriting
(Please include a recent passport photo with this application)

Date: _____

1. Position applied for: _____

2. Name: _____
Last First Middle

3. Mailing and Physical Address: _____

Tel: (Home) _____ (Work) _____ (Cell) _____

4. Date of Birth: _____ Marital Status: _____ Male Female

5. Country of citizenship: _____

If not a citizen of the Cayman Islands, do you hold Caymanian status? Yes (please attach a copy of your status) No

Are you a resident in the Cayman Islands with the right to work? Yes (please attach a copy of the documentation) No

6. Driver's Licence No.: _____ Group(s): _____ Expiry Date (dd/mm/yy): _____

7. Date available for work (dd/mm/yy): _____ Starting wages desired: \$ _____

8. Referral source: Advertisement School Employment agency On my own Company employee Other _____

9. Have you lost more than five (5) working days through illness in the past 12 months? Yes No

If yes, give brief details: _____

10. Are you willing to work evening or night shifts? Yes No

11. CUC must provide 24 hour-a-day service to its customers. Many jobs require employees to occasionally work overtime, weekends and holidays. Are you willing to work whatever schedule is necessary to help us meet our corporate objectives and obligations to customers? Yes No

12. In case of an accident or emergency, please notify: Name: _____

Address: _____

Tel: (Home) _____ (Work) _____ (Cell) _____