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**Fabrica References and Disclosure Form**

**Post: Administrator**

Name

Address

Postcode

Email

Phone

**References**

Please give us details of two referees:

1. Name 2. Name

Address Address

Phone Phone

**Any information you give us will be treated as confidential.**

**Criminal Record** (Please tick the appropriate box)

Do you have any criminal convictions? 􀀀 No 􀀀 Yes

We may require further information if Yes.

**Health** (Please tick the appropriate box)

Do you have any condition that may have a sudden effect on your health/wellbeing or that you think might be useful for us to know about?

􀀀No 􀀀 Yes 􀀀 I choose not to answer

If Yes please give further details:

Please let us know what we would need to put in place to ensure any access requirements you have are met through the interview process? We are happy to meet any reasonable requirements.

􀀀No 􀀀 Yes 􀀀 I choose not to answer

If yes please give further details: