



## Pre-Apprenticeship Application Form

First Name:

Surname:

Telephone No:  
Mobile:

Email address:

Date of Birth:

Nationality:

Full Postal Address:  
  
  
Postcode:

### Education & Qualifications:

Schools attended	From:	To:

Subjects studied	Result	Subjects studied	Result	Subjects studied	Result

**Skills & Experience** (Briefly outline any relevant previous experience)

### References

Name: Address:  Postcode: Telephone No: Relationship to You:	Name: Address:  Postcode: Telephone No: Relationship to You:
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**Please return completed application forms to:**

Borders Machinery Ring Ltd, Leader House, Mill Road, Earlston, TD4 6DG

Tel: 01896 758091

Fax: 01896 757036

Email: [bmr@ringleader.co.uk](mailto:bmr@ringleader.co.uk)