



Hardie Caldwell LLP

CHARTERED ACCOUNTANTS & BUSINESS ADVISERS

Graduate Application Form



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Personal Details

Name

Home Address

.....

.....

Postcode

Home Phone Number

Term Time Address

(if different from above)

.....

Postcode

Phone Number

Email Address

Mobile Number

Driving License *YES/NO * Delete as appropriate

Do you require a Work Permit *YES/NO * Delete as appropriate



Education & Work Experience

Summary of Secondary Education

Dates	Location	Subjects	Qualifications Gained

Further Education

Dates	Location	Subjects	Qualifications Gained

Work Experience

Please detail any work experience you have gained to-date, the role that you held and the period of employment:



More About You

Please answer the questions below. You may attach a separate sheet if required.

How would you describe yourself in terms of your ability to work as part of a team?

Give an example of an important goal that you have set in the past. Were you successful? Why?

Describe a time when you had to adapt to a difficult situation. How did you overcome this?

What qualities/attributes do you feel you have that will most contribute to your career success?

Hobbies and Interests

Signed

Date