



Established 1847



# cadet application and interview form

PLEASE PRINT YOUR FULL NAME HERE IN BLOCK CAPITALS:

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS IN BLACK INK



e-mail: [cadets@james-fisher.co.uk](mailto:cadets@james-fisher.co.uk) [www.james-fisher.co.uk](http://www.james-fisher.co.uk)

Please indicate your preference below:

Deck Cadetship ☐

Engineer Cadetship ☐

James Fisher ☐

PNTL ☐

Any Company ☐

Your Surname:

First Name(s):

Date of Birth: \_\_\_\_\_  
(DAY) / (MONTH) / (YEAR)

Nationality:

Place of Birth:

Address:

Post Code:

Telephone Number:

Mobile/Other Contact Telephone Number:

E-mail Address:

Nearest Rail Station:

Nearest Airport:

Next of Kin.

Name:

Relationship:

Address (if different from above):

Post Code:

## PERSONAL DETAILS

Weight:

Height:

Shoe Size:

Chest Size:

Passport Number:

Passport Expiry Date:

NHI Number:

## BANK DETAILS

Bank Name:

Bank Address:

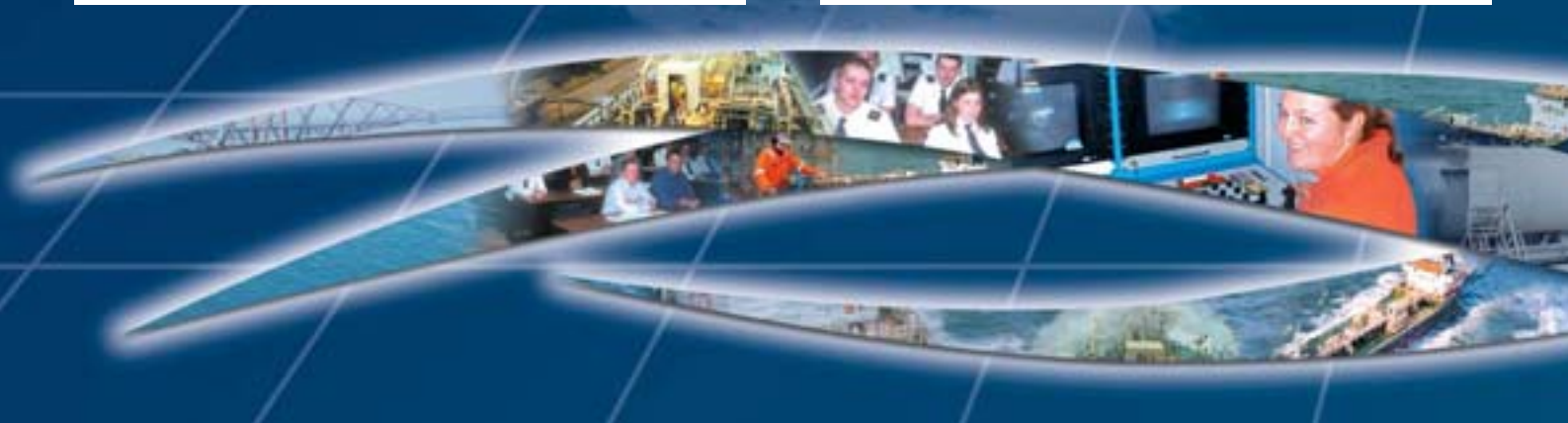
Post Code:

Account Number (8 digits):

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Bank Sort Code (3 sets of 2 digits):

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## QUALIFICATIONS

Please indicate all of your qualifications below. Where examination results have not yet been gained, please indicate your expected result. Please continue on an extra sheet if necessary.

Name and Address of School or College:

Telephone Number:

### GCSE OR STANDARD GRADES

Subject	Grade (If yet to be taken, please indicate expected grade.)	Year Taken
Mathematics		
English Literature		
English Language		
Physics		
Dual Science		
Chemistry		
Geography		
History		
CDT		

### A LEVEL OR HIGHER GRADES

Subject	Grade (If yet to be taken, please indicate expected grade.)	Year Taken
Mathematics		
English		
Physics		

### OTHER QUALIFICATIONS


## MEDICAL

Do you:

Wear glasses and/or contact lenses? Yes ☐ No ☐

Suffer from colour deficiency (colour blindness)? Yes ☐ No ☐

Suffer from diabetes? Yes ☐ No ☐

Have any medical condition likely to prevent a career at sea? Yes ☐ No ☐

Have you:

Ever suffered from epilepsy? Yes ☐ No ☐

Ever suffered from asthma? Yes ☐ No ☐

Ever suffered from any nervous disorders? Yes ☐ No ☐

Ever had any criminal convictions? Yes ☐ No ☐

If the answer to any of the above questions is yes, please provide details below:

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James Fisher and Sons,  
Crewing Services Limited,  
Fisher House, P.O. Box 4,  
Barrow-in-Furness, Cumbria,  
LA14 1HR, England.

Telephone: 01229 615564  
Facsimile: 01229 835523  
Freephone: 0800 269508

## PERSONAL INFORMATION

Are you a member of any organisations, if so, which?

How did you obtain information on this company?

Any sports, hobbies or pastimes?

Any other information that you feel may be useful?

Have you made any applications to other shipping companies, if so who?

**PLEASE WRITE** (in no more than 150 words) **WHY YOU WISH TO PURSUE A CAREER AT SEA**

Signed:

Date:

## THIS SECTION IS FOR OFFICIAL USE ONLY

Interview Date:

Location:

Interviewer(s):

Comments:

Position Offered:

YES ☐ NO ☐

JFS ☐ PNTL ☐

Start Date:

College:

Signed:

Date:

e-mail: [cadets@james-fisher.co.uk](mailto:cadets@james-fisher.co.uk)

[www.james-fisher.co.uk](http://www.james-fisher.co.uk)