

# Application form



Send the completed application form together with your application portfolio (covering letter, CV, references, certificates) to our postal address or email with the relevant attachments to: [bewerbung@louis.de](mailto:bewerbung@louis.de). Please make sure to send us your documents via internet encrypted. We regret that we are unable to consider applications that are incomplete. Thank you!

Application for job as: \_\_\_\_\_

Where possible in/city: \_\_\_\_\_ Possible start date: \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Birth name: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Born on: \_\_\_\_\_ Marital status: \_\_\_\_\_

Nationality: \_\_\_\_\_ Phone number: \_\_\_\_\_

Street/house number: \_\_\_\_\_

Post code/city: \_\_\_\_\_

Email address: \_\_\_\_\_

Education and qualifications: \_\_\_\_\_

Vocational trade: \_\_\_\_\_

Training company: \_\_\_\_\_

Examinations passed: \_\_\_\_\_

Special professional and sector expertise:

Driving license (class and date): \_\_\_\_\_

**Previous employment** (incl. temporary jobs and internships):

Company: \_\_\_\_\_ Area of activity: \_\_\_\_\_ Duration: \_\_\_\_\_

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Current additional employment: \_\_\_\_\_

Previous wage/salary: \_\_\_\_\_ Wage/salary expectations: \_\_\_\_\_

Do you have any special requirements in the workplace, in terms of physical ability, which need to be taken into account by the employer?

\_\_\_\_\_

Why would you like to work for our company?

If you are already familiar with our company, is there anything you particularly like/dislike?

Why do you believe that you are the best person for the advertised position?

**For temporary staff only:**

Do you receive an earnings-related, retirement or disability pension?  No  Yes

Insurance provider: \_\_\_\_\_

**The following applies solely to foreign nationals who require certain permits for job seeking purposes:**

Residence permit issued on: \_\_\_\_\_ Valid until: \_\_\_\_\_

Work permit issued on: \_\_\_\_\_ Valid until: \_\_\_\_\_

**Only for trainees who are still minors:**

Name of parents: \_\_\_\_\_

Name of legal representative: \_\_\_\_\_

Your data will be stored for the duration of the application procedure.

I declare that the above details are correct. I am aware that knowingly submitting false information may result in the contract of employment being challenged or in dismissal. I undertake to immediately inform the management/HR department in the event of any changes.

\_\_\_\_\_  
City Date Signature