



GRADUATE APPLICATION FORM



This form should also be used for 'Christmas Course' applications

If you wish to apply for our Christmas Courses, tick box. Engineering Course Commercial Course
If not, please continue. This application will be treated as a standard Graduate application.

<p>This form is an important part of our selection procedure and as such is designed to enable you to give a useful written representation of yourself, and to assist us to make a judgement about your suitability for the appointment concerned.</p> <p>Please answer all questions fully in BLACK INK.</p> <p><i>Mailing address for forms</i></p> <p>RECRUITMENT CENTRE ESSO AND EXXONMOBIL GROUP IN THE UK FAWLEY SOUTHAMPTON SO45 1TX TELEPHONE 023 8089 6000</p> <p>Please do not attach any supplementary data in addition to the information you supply on this form</p>	PERSONAL DETAILS																																							
	Surname		Dr/Mr/Miss/Mrs/Ms Current or most recent University																																					
	First name(s)		Degree Level (eg BSc/MA/PhD etc)																																					
	Date of birth / /		Subject Studied																																					
	Current age		Year of Graduation																																					
	Place of birth		We actively encourage applications from people with disabilities and those from ethnic minority backgrounds. To ensure that our Equal Opportunities Policy is working effectively please indicate your ethnic background/origin (not citizenship).																																					
	Home/permanent address		<table border="1"> <thead> <tr> <th>White UK/Irish</th> <th>White Other</th> <th>Black West Indian</th> <th>Black African</th> <th>Black Other</th> <th>Asian</th> <th>Other</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> <td>7</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							White UK/Irish	White Other	Black West Indian	Black African	Black Other	Asian	Other	1	2	3	4	5	6	7																	
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	1	2	3	4	5	6	7																																	
e-mail address		If you have ticked box 7, please specify.																																						
Telephone number		Do you have any special needs for first interview? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify.																																						
Dates when we can contact you at this address		Do you have any restriction on your geographic mobility? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please state reasons.																																						
From To		Are you a home-owner? Yes <input type="checkbox"/> No <input type="checkbox"/>																																						
From To		Dates of Easter vacation																																						
From To		Date at which employment could start																																						
From To		Dates not available for interview																																						
<p>Has any county court judgement been made against you in the last 5 years? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please indicate outcome.</p> <p>Have you ever been convicted of a criminal offence which is not yet 'spent' under the Rehabilitation of Offenders Act 1974 (excluding motoring offences for which no disqualification was imposed)? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please indicate outcome.</p> <p>Have you any close relatives employed or engaged in the oil industry other than with Esso/ExxonMobil Group? If yes, please state relationship and company.</p>																																								
<p>Please give details of any previous application to Esso/ExxonMobil Group giving date and outcome.</p>				<p>Do you have, or have you had, any alcohol or drug dependency? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Please give details of any other contact with Esso/ExxonMobil Group.</p>																																				
<p>Do you hold a current UK driving licence?</p> <p>Full <input type="checkbox"/> Provisional <input type="checkbox"/> No <input type="checkbox"/></p>				<p>Do you need a work permit for regular employment in the United Kingdom? Yes <input type="checkbox"/> No <input type="checkbox"/> We regret that we cannot consider your application if you need a work permit.</p>																																				
<p>Please indicate your choice of up to three initial appointments in order of preference (1, 2, 3). You should refer to the Graduate Recruitment Brochure to help you make your choice.</p> <table border="0"> <tr> <td>Commercial:</td> <td>Sales and Marketing</td> <td><input type="checkbox"/></td> <td colspan="5">If you have a preferred Sales & Mktg choice please state _____</td> </tr> <tr> <td></td> <td>Gas</td> <td><input type="checkbox"/></td> <td colspan="5">Information Technology Management <input type="checkbox"/> Human Resources <input type="checkbox"/></td> </tr> <tr> <td>Technical:</td> <td>Fawley Manufacturing</td> <td><input type="checkbox"/></td> <td colspan="5">Chemical Manufacturing (Fife) <input type="checkbox"/> Supply and Distribution <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td colspan="5">EE(E)L Esso Engineering (Europe) Ltd <input type="checkbox"/></td> </tr> </table> <p>Other: please specify _____</p>									Commercial:	Sales and Marketing	<input type="checkbox"/>	If you have a preferred Sales & Mktg choice please state _____						Gas	<input type="checkbox"/>	Information Technology Management <input type="checkbox"/> Human Resources <input type="checkbox"/>					Technical:	Fawley Manufacturing	<input type="checkbox"/>	Chemical Manufacturing (Fife) <input type="checkbox"/> Supply and Distribution <input type="checkbox"/>								EE(E)L Esso Engineering (Europe) Ltd <input type="checkbox"/>				
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* If your education took place outside the UK then please firmly attach a separate sheet with the details to this page

EDUCATION

Secondary school at which GCSEs, 'O' levels, CSEs, or 'O' Grade examinations etc were taken*. _____

Dates attended From _____ To _____

Give details of GCSEs, 'O' levels, CSEs, 'O' Grades or Standard Grades.

Type	Subject	Date	Grade	Type	Subject	Date	Grade

Secondary school/sixth form college at which 'A', 'S' levels, ONC, Highers etc, examinations were taken. _____

Dates attended From _____ To _____

Give details of 'A' levels, 'AS', 'S' levels etc or other qualifications. Give details of repeated or failed examinations.

Type	Subject	Date	Grade	Type	Subject	Date	Grade

If you took a 'Gap Year' before or after going to University, describe how you spent that time.

First degree University _____ Subject _____

Level of Degree _____ Year obtained _____ Dates _____ to _____

Class awarded if already graduated _____

Subjects studied and examination grades gained

First Year	(yr)	Grade	Second Year	(yr)	Grade	Third Year	(yr)	Grade	Fourth Year	(yr)	Grade

Second degree or higher qualification (MSc/PhD etc)

University _____ Subject _____

Level of Degree _____ Year obtained _____ Dates _____ to _____

Main areas studied

List any prizes or awards gained.

Give details of repeated or failed examinations at University, and reason.

Foreign language ability	1-Low	2-Medium	3-High	Spoken	Written	Read

FURTHER INFORMATION

Give details of project or group work undertaken as part of your studies. (If this is not part of your curriculum, give an example of project/group work in employment/as a hobby.)

What was your role in achieving the end result?

Give an example of working through and analysing complex data to come to a solution (outside academic work).

Give details of positions of responsibility held and/or any activities which you have organised in the last 5 years.

Describe a situation where you have met resistance to a decision you have made. How did you persuade others to your point of view?

What are the most stimulating, difficult or unusual experiences you have had in the last 5 years, and what have you learnt from them?

What is your strongest personal attribute? Give an example where this has helped you in the past.

EMPLOYMENT

Please include vacation work, industrial placements taken as part of your course, and any other employment.

From	To	Dates	Name of employer and location	Type of work
		Name of employer and location		

What did you learn from your employment experiences? Did these experiences influence your choice of career? If so, how?

Please give details of membership of any professional bodies.

Please tell us why you are interested in the Department(s) you are applying for.

ORIGIN OF APPLICATION

Please indicate the key influence(s) on your decision to apply to Esso/ExxonMobil Group (indicate up to three using 1, 2, 3).

- | | | | | | |
|--|--------------------------|-------------------------------|--------------------------|------------------------|--------------------------|
| Work Experience with Esso/ExxonMobil Group | <input type="checkbox"/> | Recruitment presentation | <input type="checkbox"/> | Brochure | <input type="checkbox"/> |
| Careers Fair | <input type="checkbox"/> | Careers Service | <input type="checkbox"/> | Internet | <input type="checkbox"/> |
| Personal contact/University liaison by company | <input type="checkbox"/> | General reputation of company | <input type="checkbox"/> | Other, please indicate | <input type="checkbox"/> |

Data Protection

By providing the information contained within this application form, you are consenting to its use by the Esso and ExxonMobil Group for the purpose of processing your application, assessing your performance in the future (should your application be successful) and monitoring the efficiency of our recruitment and other employment procedures.

Declaration (to be completed by all applicants)

To the best of my knowledge and belief the above information is true and I agree that, together with other information I may give during the course of my application, it may be confirmed through personal or written contact or in whatever manner the company considers necessary if I accept a conditional offer of employment from Esso/ExxonMobil Group. I understand that any offer of employment is also conditional upon passing a medical examination.

Signature _____ Date _____