



APPLICATION FORM

POSITION APPLIED FOR: _____

The following information will be treated in the strictest confidence.

We reserve the right not to respond to any applications that are not completed in full.

PERSONAL

(Please complete this section in BLOCK CAPITALS)

Surname:		First Name(s):	
Address:			

Contact Tel. No:		Mobile Tel No.	
Email Address:			
Please tick whether you would prefer to be notified by email or phone with regard to decisions to interview and / or appoint.			
Phone:	<input type="checkbox"/>	Email:	<input type="checkbox"/>
We are working towards a paperless administrative system. Letters will not be sent.			
Full Driving Licence:	YES/NO	Endorsements:	*YES/NO
* If YES, please give further details including dates.			

Are you involved in any activity which might limit your availability to work or your working hours e.g., local government?	YES/NO
If YES, please give full details.	
Are you subject to any restrictions or covenants which might restrict your working activities?	YES/NO
If YES, please give full details	
Are you willing to work overtime and weekends if required?	YES/NO
Please give details of any hours which you would not wish to work:	
Have you any convictions (other than spent convictions under the Rehabilitation of Offenders Act 1974)?	YES/NO
If YES, please give full details	
If offered employment, you will be required to complete a Pre-Employment Medical Questionnaire. Are you prepared to undergo a medical examination before employment?	YES/NO
Have you ever worked for this business before?	YES/NO
If YES, please give full details	
Have you applied for employment with this business before?	YES/NO
Do you need a work permit to take up employment in the U.K.?	YES/NO
How much notice are you required to give to your current employer?	

EDUCATION

Schools attended since age 11	From	To	Examinations and Results
College or University	From	To	Courses and Results
Further Formal Training	From	To	Diploma/Qualification
Job related Training Courses Name of Organisation	Date	Subject	

Please give details of membership of any technical or professional associations:

Please list languages spoken and the level of competence:

EMPLOYMENT DETAILS

Please give details of your past employment, excluding your present or last employer, stating the most recent first. Please provide details for all dates, including times when not in employment and reasons why.

Name and address of employer	Dates	Position held/Main duties	Reason for leaving

INTERESTS, ACHIEVEMENTS, LEISURE ACTIVITIES (e.g. hobbies, sports, club memberships)

SUPPLEMENTARY INFORMATION

Please set out below any further information to support your application, e.g. past achievements, future aspirations, personal strengths.

DISCLOSURES

Given the nature of the job applied for, in the event that I am offered the position, I understand that any offer of employment is subject to information on my criminal record being disclosed to the company by the Disclosure and Barring Service (DBS).

DECLARATION

I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable to summary dismissal. I understand these details will be held in confidence by the Company, for the purposes of assessing this application, ongoing personnel administration and payroll administration (where applicable) in compliance with the Data Protection Act 1998.

I am not barred from working with any vulnerable groups as per the Disclosure and Barring Service records.

Signature:	Date:
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REFERENCES

Please give the names of **two** people (one of which should be your present or most recent employer) whom we may approach for a reference.

Your referees will be asked if you have been subject to any safeguarding concerns.

We will approach your current employer before an offer of employment is made, unless a specific reason is given.

Name:	Name:
Position:	Position:
Address:	Address:
Tel. No:	Tel. No:

SOURCE OF APPLICATION

How did you hear of this vacancy?

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