



Please complete this application form in **BLACK INK**, as accurately as possible and submit it on or before the closing date. Only information submitted on this form or other approved means will be considered. All information given will be treated with the strictest confidence. Any form of canvassing will disqualify the applicant. Information supplied will be recorded and maintained in accordance with the Data Protection Act.

1. Position Applied For: _____ Reference Number: _____
Please indicate if you are applying for Full Time or Casual Employment

2. PERSONAL DETAILS

Surname: _____ National Insurance No: _____

Forename: _____ Telephone No: (Home) _____

Dr/Mr/Mrs/Miss/Ms _____ (Work) _____

Address: _____ *(Mobile) _____

*Postcode: _____ *Email: _____

Are you eligible to live and work in the UK? Yes / No Do you have an EU work permit / VISA Yes / No

Details _____

3. DRIVING LICENCE

*Do you have a clean current driving licence? Yes / No

Type of licence: Car / LGV* * Class _____

Have you a car/access to a car for business use? _____

Please provide details of any endorsements _____

4. GENERAL

Please declare e declare any convictions which are not regarded as 'spent' under the Rehabilitation of Offenders Order (1978)

5. SPECIAL ARRANGEMENTS

Please detail any special arrangements to be made to assist you if called for interview? Yes/No
If **Yes**, please provide details below:

6. EDUCATION

Name of College / University	Subjects Taken	Qualifications Gained

Type of School Attended (i.e. Secondary, Grammar)	Examinations Taken	Grade

Other training/relevant courses attended (e.g. food hygiene, health and safety, manual handling, IT, professional)	Qualifications / Certification Gained

Membership of Professional Organisations	Grade of Membership

7. EMPLOYMENT RECORD

Please list most recent employer first

Name and Address of Employer and Nature of Business	Dates of employment	Position and Main Duties and state whether Full Time, Part Time or Work Experience	Detailed Reason for Leaving

Are you able to work shifts and weekends? Yes / No Details _____

Current basic pay/salary £ _____ Other benefits: _____

Expected pay/salary: £ _____ Are you currently in employment: Yes / No

If in employment, how much notice are you required to give? _____

REFERENCES: *Please provide the names and addresses of two referees, one of whom must be your most recent employer*

1. Referee Name: _____

2. Referee Name: _____

Address: _____

Address: _____

Tel: _____

Tel: _____

Relationship to applicant: _____

Relationship to applicant: _____

May we contact this referee without prior consent? Yes/No

May we contact this referee without prior consent? Yes/No

8. SKILLS AND EXPERIENCE

Please clearly demonstrate how you meet the essential and desirable criteria, providing examples where applicable. What are the main aspects of your employment record which you feel make you suitable for the post you are applying for?

9. ADDITIONAL INFORMATION

Please use this space to provide any additional information which you consider relevant to your application. This may include e.g. leisure interests, hobbies, voluntary work.

10. LANGUAGES

Please state proficiency, including English.

11. I.T. SKILLS

Please indicate your level of I.T. competence, detailing any applications or software with which you are familiar.

12. VACANCY DETAILS

Where did you learn about this post?

please specify _____

13. MEDICAL QUESTIONNAIRE

Have you been admitted to hospital in the last five years due to illness / accidents? Yes/No

Discounting holidays, how many days have you been absent from work owing to illness / accidents in the past year? _____ days

Please use the space below to detail reasons for absence:

14. DECLARATION

DECLARATION OF APPLICANT:

I certify that to the best of my knowledge, all information that I have provided is correct. I understand that any false information given or to suppress any material fact will leave me liable to disqualification, or if in employment, dismissal.

SIGNATURE: _____ DATE: _____

If you have completed this application form on behalf of the applicant, please complete the following declaration:

I have completed this form based upon information provided to me by the applicant. I understand that I could be held legally liable for any false statement contained herein.

SIGNATURE: _____ DATE: _____

Relationship to applicant: _____

PLEASE ENTER **YOUR** NAME AND ADDRESS:

Name: _____

Address: _____

Postcode: _____

