

APPLICATION FOR EMPLOYMENT (Confidential)

Job Title:

Job Title:

# IMPORTANT NOTE

Thank you for your interest. Please read the following notes before completing the form.

Please:

* Read any enclosed additional information before completing the form
* Complete the form using black ink for photocopying purposes
* Give all the information you can about yourself and why you think you are suitable
* Complete the monitoring information and sign the declaration on the back sheet. Use separate sheets as necessary

|  |  |  |
| --- | --- | --- |
| Your full name and address (please print in block capitals) |  | Tel No. where you can be contacted  Day  Evening |

## REFERENCES

We always take up references. Please give names and addresses for 3 referees who know you well enough to comment on your suitability for the job. One of them must be your present or most recent employer. If you have not been previously employed, give the name of a responsible person who knows you well (but NOT a relative)

|  |
| --- |
| Your former name and job title if applicable |

Give your former name if different from above

to ensure we are asking for the correct reference

|  |  |  |
| --- | --- | --- |
| Referee’s name and  Status/Job Title | Address for contact | May we approach before interview? |
| Tel No. |  | YES NO |
| Tel No. |  | YES NO |
| Tel No. |  | YES NO |

**EDUCATION** Please give details of your education and qualifications.

**& QUALIFICATIONS** Make sure you include any professional qualifications.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Education and Qualification Details | Results/  Grades Obtained | Where obtained (say if full or part-time) | Date From | Date To |
|  |  |  |  |  |

## TRAINING List training courses undertaken including practical, in-house, commercial and special training courses. Include any apprenticeships, training schemes, evening classes and adult education

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Course & training Details | Results/  Grades Obtained | Where obtained (say if full or part-time) | Date From | Date To |
|  |  |  |  |  |

Do you have a current driving licence? YES/NO Do you have a car? YES/NO

## LANGUAGE SKILLS

|  |
| --- |
| Which languages other than English do you speak and/or write (Please tick if fluent)  Language Speak Write Language Speak Write |

## HEALTH

|  |
| --- |
| Are you aware of any medical condition that could affect your performance at work? YES/NO  If yes, please supply brief details. |

PRESENT (most recent) EMPLOYMENT

|  |  |  |  |
| --- | --- | --- | --- |
| Employer’s Name & Address | Position Held | Dates from and To | Reason for wishing to leave |
|  |  |  |  |
| Tel No. Salary | Hrs worked |  |  |
| Brief note of Duties & Responsibilities |  |  |  |

**PREVIOUS EMPLOYMENT**  Please show whether Full or Part-Time in each case

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Employer’s Name & Address | Position Held | F/T P/T Hours | Salary/Wage | Date From/To | Reason for Leaving |
|  |  |  |  |  |  |

## ADDITIONAL **INFORMATION**

## Use this space to show you have the skills, knowledge & experience

to do the job. Include details of home-based work; work in the community or with other voluntary groups and your leisure interests to support your application (continue overleaf and on separate sheets if necessary)

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|  |

### ADDITIONAL INFORMATION continued

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| --- |
| How did you learn of this vacancy? |
| You must give details of any relationship to any member of the Management Committee as failure to do so or seeking improperly to influence the selection process will disqualify you from appointment.  **Are you related to any member of the Management Committee or Senior Officer of the Project?**  YES/NO (If yes, give details) |
| I DECLARE THAT THE INFORMATION I HAVE GIVEN IN THIS APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE  Note: Withholding, falsifying or omitting relevant information by a successful candidate may be  grounds for dismissal.  Signed: Date: |

**RIGHT TO WORK IN THE UK**

**EQUAL OPPORTUNITIES INFORMATION (in confidence)**

Please help us to ensure our equal opportunities policy is effective by completing the following information

**Your personal Details Ethnic Classification (as per the C.R.E.)**

|  |  |  |
| --- | --- | --- |
| Date of Birth |  | Age |
| Male |  | (Please tick) |
| Female |  |  |
| NI Number |  |  |

|  |  |
| --- | --- |
| I would describe myself as (please tick)  White  Black – Caribbean  Black – African  Black – Other  Indian  Pakistani  Bangladeshi  Other (Specify) |  |
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**Disability**

Note that it is our policy to interview all people with disabilities who meet the essential requirements of the personal specification.

Do you consider yourself to have a disability?

If YES are you registered disabled?

If YES, are there any special arrangements you would like us to make if you are interviewed?