APPLICATION FORM FOR POTENTIAL EMPLOYEES

Personal Details

We welcome applications from everyone regardless of age, race, colour, sex, marital status, religious belief, ethnic and national origins disability or sexual orientation.

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| Position Applied For: |  |  |

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| Title: |  |  |

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| **First Name(s):** |  |  |

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| **Last Name:** |  |  |

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| **Any Former Names:** |  |  |

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| **Address:** |  |  |
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| **Post Code:** |  |  |

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| --- | --- | --- |
| **Home Tel:** |  |  |

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| **Email:** |  |  |

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| --- | --- | --- |
| Date of Birth: |  |  |

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| NI Number: |  |  |

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| Dates unavailable for interview: This information will be used to ensure correct identification of the applicant for safeguarding purposes. |  |  |

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| Do you hold a full, clean drivers licence? (Please tick) |  | **Yes** |  | **No** |  |

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| --- | --- | --- | --- | --- | --- |
| Do you have your own transport |  | **Yes** |  | **No** |  |

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| --- | --- | --- | --- | --- | --- |
| Are you currently eligible to work within the UK? |  | **Yes** |  | **No** |  |

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| --- | --- | --- |
| **Do you need any special requirements if invited for interview?** |  | Please state here: |

## Present / Most Recent Employment

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| Employer: Please remember to include any specific projects, or areas of responsibility that you have held/or are holding. |  |  |

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| --- | --- | --- |
| Job Title: |  |  |

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| Date Started: |  |  |

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| --- | --- | --- |
| Date Ended Please describe in brief your duties and responsibilities. (if applicable): |  |  |

|  |  |  |
| --- | --- | --- |
| Reason for Leaving(If applicable) |  |  |
|  | | |
| Notice Required: |  | *(if applicable)* |

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| --- | --- | --- |
| Annual Salary: |  |  |

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| --- | --- | --- |
| Duties and Responsibilities: |  |  |

## Previous Employment

*(Most recent first since leaving school including part time and any voluntary work and explanations for periods not in employment, education or training. Please use a blank sheet to add any additional details).*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Job Title:** | **Employer:** | **Duties:** | Dates | | Reason for Leaving | Post included working with children, young people and/or vulnerable adults, please tick |
| **From:** | **To:** |
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Qualifications *(relevant to post)*

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| **Qualification(s):** | **Awarding Body** | **Date of Award** |
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## Membership of Professional Bodies

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| --- | --- | --- |
| Organising Body: \* eg. Full / provisional |  |  |

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| --- | --- | --- |
| Registration No: |  |  |

|  |  |  |
| --- | --- | --- |
| Type of Registration: |  |  |

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| --- | --- | --- |
| Renewal Date: |  |  |

## Other Information Supporting your Application for a Post

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| --- |
| By using clear, identified examples, please demonstrate how you meet the criteria indicated on the Job Description and Person Specification in the Appointment Brief.  **Please do not send a CV.** |

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| **Experience:** |
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| **Knowledge / Skills:** |
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| --- |
| **Personal Attributes:** |
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| **Additional Requirements:** |
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**Disclosure of Criminal Background**

If you will be applying for a post which is an exempt position under the provision of the Rehabilitation of Offenders Act 1974 the statement *“that after a certain period of time, convictions need not be disclosed and those convictions treated as if they never took place”* **does not apply**. You must therefore, declare any pending prosecutions, any convictions, cautions or bind-overs which you have had at any time. The information provided will be treated as confidential and will apply only to that particular vacancy. It is essential that you complete and sign this form. If you do not have any convictions, cautions or bind-overs, then please write “None” across the boxes. Any job offer made will be subject to a satisfactory Disclosure and Barring Service (DBS) check.

## Criminal Convictions

|  |  |  |
| --- | --- | --- |
| Date: |  |  |

|  |  |  |
| --- | --- | --- |
| Details of Convictions, Cautions or Bind-Overs: |  |  |

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| Penalty: |  |  |

## Pending Convictions

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are there any matters pending? |  | Yes |  | No |  |

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| **If “Yes” please give details:** |
|  |

**Declaration**

I hereby declare that I am not on List 99, disqualified from working with children, young people or vulnerable adults or subject to sanctions imposed by a regulatory body.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |

**References**

**1st Referee**

|  |  |  |
| --- | --- | --- |
| Contact Name: |  |  |
| Job Title: |  |  |
| Company Name: One of the two referees must be your present or last employer, if previously employed.  Referees cannot be relatives or people writing solely in the capacity of friends.  \*Including STD code |  |  |

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| **Address:** |  |  |
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| **Post Code:** |  |  |

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| **Tel. No:** |  |  |

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| **Email Address:** |  |  |

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| Permission to contact referee prior to interview stage: |  | **Yes** |  | **No** |  |

**2nd Referee**

|  |  |  |
| --- | --- | --- |
| Contact Name: |  |  |
| Job Title: |  |  |
| Company Name: |  |  |

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| --- | --- | --- |
| **Address:** |  |  |
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| **Post Code:** |  |  |

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| **Tel. No:** |  |  |

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| **Email Address:** |  |  |

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| Permission to contact referee prior to interview stage: |  | **Yes** |  | **No** |  |