

**APPLICATION FOR EMPLOYMENT**

# PRIVATE AND CONFIDENTIAL For handwritten applications please complete in BLOCK CAPITALS

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Position applied for: | |  | | | | | | | | | |
|  | | | | | | | | | | | |
| **A. PERSONAL PARTICULARS** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Full Name: Mr/Ms/Mrs/Miss | | | | | | | | | | | |
| Address: | | | | | | Telephone Number: | | | | | |
|  | | | | | | Home: | | | | | |
|  | | | | | |
| Mobile: | | | | | |
|  | | | | | |
| Business: | | | | | |
|  | | (Tick box if you do not want to be contacted at work). | |  |  |
|  | | | | | |
| Email: | |  | | | |
|  | | | | | |  | | | | | |
| N.I. Number: |  | | | | |
|  | | | | | |
|  | | | | | | | | | | | |
| **B. EDUCATION AND QUALIFICATIONS** | | | | | | | | | | | |
|  |  | |  | | |  |  | |  | | |
| QUALIFICATIONS: Please give details of examinations attempted and results (including any examinations failed). | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Name(s) and Address(es) | | | Dates | | Subject/Courses | | | | Examination Result/ | | |
| of School(s)/College(s) | | |  |  | Studied & Level | | | | Grade | | |
|  | | | From | To |  | | | |  | | |
|  | | |  |  |  | | | |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| FURTHER AND HIGHER EDUCATION: Please give details of all further and higher education since leaving school | | | | |
| including training courses and details of qualifications. | | | | |
|  | | | | |
| University/College/ | Dates | | Subjects Studied/ | Qualifications |
| Institute Attended |  |  | Type of Training | Obtained |
|  | From | To |  |  |
|  |  |  |  |  |
| PROFESSIONAL ASSOCIATIONS: Please state whether you are a member of any technical or professional association, and if so, which: | | | | |

**C. EMPLOYMENT HISTORY**

Please list in reverse order all the organisations for which you have worked during the last 20 years:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name(s) and Address(es) | Dates | | Position Held/ | Reason for |
| of Employer(s) | From | To | Main Duties | Leaving |
|  |  |  |  |  |

**D. RELEVANT EXPERIENCE**

Please give details of your spiritual/natural gifts, experience, skills or achievements which you feel may be relevant in your application for this post. (Continue on separate sheet if necessary):

|  |
| --- |
|  |

**E. HEALTH**

|  |  |
| --- | --- |
| Are you in good health? | Yes/No |
| If no, please give further information: |  |
| Have you ever suffered from any serious illness or had any major operation? | Yes/No |
| If yes, please give details: |  |

**F. SUPPLEMENTARY INFORMATION**

|  |  |
| --- | --- |
| Are you subject to any restraints in your current or future employment?  If yes, please give further information: | Yes/No |
| Have you ever been convicted of a criminal offence (which is not a spent conviction under the Rehabilitation of Offenders Legislation):  If yes, please give further information: | Yes/No |
| Salary Range Expected: |  |
| How much notice are you required to give to leave your present employment? |  |
|  |  |
| Please list your interests, sports, hobbies, etc. |  |
| Do you have a current full driving licence? | Yes/No |
| Does your licence have any current endorsements?  If yes, please give further information: | Yes/No |

## G. REFERENCES

Please give the names and addresses of **two referees** who are not related to you, who we can approach for a confidential assessment of your suitability for this job. (One of these should normally be a previous employer).

Can we approach your present/most recent employer? Yes/No

|  |  |
| --- | --- |
| Name, Position, Address and Telephone Number | Name, Position, Address and Telephone Number |
|  |  |

|  |
| --- |
| (Tick in box if you do not wish your employer to be contacted before an offer of employment is made) |

**DECLARATION OF APPLICANT**

I confirm that the above information is correct.

Signed: .......................................................……………....... Date: ......................................

|  |  |
| --- | --- |
| **FOR OFFICE USE ONLY** | **INTERVIEW RECORD** |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Interviewed by: | | | | Date: | | | | | |
| Comments/Areas to Examine: | | | | | | | | | |
|  | | | | | | | | | |
| Decision: | Reject |  | Further Interview | |  | Accept | |  |  |
| (tick as applicable) | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| Interviewer’s report and reasons for decision: | | | | | | | | | |
|  | | | | | | | Rejection letter sent: Yes/No | | |

|  |  |
| --- | --- |
| **APPOINTMENT RECORD** (To be completed where there has been an offer of employment). | |
| CONDITIONAL OFFER LETTER:  Date sent:  Response:  Acceptance/Refusal/No reply | REQUESTS FOR REFERENCES:  Date sent:  Response:  Good/Satisfactory/No Reply/ Suspect/Unsuitable |
| MEDICAL/MEDICAL REPORT:  Date sent:  Response:  Good/Satisfactory/ Suspect/Unsuitable | OTHER CONDITIONS:  Further proof of N.I. number or right to work requested: |
| Starting Date:  Starting Salary: | Job Title: |