1. Position applied for:

|  |
| --- |
|  |

2. Personal Details:

|  |  |  |  |
| --- | --- | --- | --- |
| Surname: | Forenames: | | |
| Title: |  | | |
| Address: | | | |
|  | | | |
|  | | | Postcode: |
| Preferred Contact Telephone Number (1): | | Preferred Contact Telephone Number (2): | |
| Honours and awards: | | | National Insurance Number: |

3. Education

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Schools/Colleges attended | From | To | Examinations passed | Grade |
|  |  |  |  |  |

4. University/College Higher Education and Professional Qualifications

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Place of Education | From | To | Examinations passed (give qualifications) | Grade/Class |
|  |  |  |  |  |

5. Employment history   
  
(Please list in order, starting with the most recent)

Please give reasons for any breaks in employment. Continue on a separate sheet if necessary.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Dates  From | To | Name and address of employer | Job title and responsibilities | Reason for leaving | Final salary |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |

|  |
| --- |
| Length of notice required by your present employer: |

6. Other skills / qualifications relevant to the post

|  |  |
| --- | --- |
| Description | When undertaken |
|  |  |

7. General:

|  |
| --- |
| How did you hear of this job? |

|  |
| --- |
| Why do you wish to leave your present employment? |

|  |
| --- |
| How do you think your previous experience or interests will enable you to fulfil this post? (500 words max) |

|  |
| --- |
| Interests/Hobbies (give details of pastimes, sports, etc.): |

|  |
| --- |
| Do you have a valid UK driving licence? |
| For the purposes of insurance do you have any current endorsements?  (Other than penalty points for parking or speeding offences) |

|  |
| --- |
| If the role applied for is expected to involve work with children and vulnerable adults, in line with exemptions under the Rehabilitation of Offenders Act 1974, please declare any convictions, cautions, reprimands and final warnings that are not protected as defined by the Rehabilitation of Offenders Act 1974 *(Suitable applicants will not be refused posts because of offences which are not relevant to, and do not place them at or make them a risk in, the role for which they are applying).*  A conditional offer will be made to the successful candidate, subject to an enhanced Disclosure and Barring Service (DBS) check. |

8. Health:

|  |
| --- |
| Do you have any health issues that may affect your work or require reasonable adjustments (if yes please give details)? |

9. Emergency Contact:

|  |
| --- |
| If you wish to do so, please give details of next of kin or person who can be contacted in an emergency: |
| Name: |
| Relationship: |
| Address: |
| Telephone number: |

10. References:

Please supply 2 references. One reference should be from your current/most recent employer. The other should not be a relative. References will not be sought from your previous employer until an offer of employment is made.

|  |
| --- |
| Name: |
| Address: |
|  |
| Occupation: |
| Telephone No.: |

|  |
| --- |
| Name: |
| Address: |
|  |
| Occupation: |
| Telephone No.: |

**Proof of educational and professional qualifications may be requested.**

**It is the policy of the Trust to employ the best qualified personnel and provide equal opportunity for the advancement of employees including promotion and training, and not to discriminate against any person because of race, ethnic origin, nationality, gender, sexuality, marital status, disability or age. If you object to any of the questions on the application form on the basis of discrimination, you are at liberty, without prejudice, to omit them.**

I authorise the Trust to obtain references to support this application when an offer is to be made and I hereby indemnify the Trust against any liability related thereto.

I hereby consent to the Trust processing the data on this form, and (if applicable) subsequent data collected during the administration of my term of employment, for the purpose of considering my application for employment and (if applicable) administering and supervising my employment and any subsequent pension. I agree that such data may be made available to those who reasonably need to know the same within the Trust. The Trust will destroy my personal data once no longer required for current administrative purposes.

**Declaration: I confirm that the information given on this form is to the best of my knowledge, true and complete and accept that any false statement may be sufficient cause for rejection or, if employed, summary dismissal.**

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