(NAME OF ORGANISATION)

(Name of Organisation) is committed to Equal Opportunities. We will treat all applications on their merits.

Only applicants who complete this application form can be considered for the post. *Please note that Curriculum Vitaes (CVs) will not be accepted.*

(Please write clearly in black as forms will be photocopied.)

POST APPLIED FOR:	
PERSONAL DETAILS	
Name:	
Address:	
Telephone: (Day)	
(Day)	
(Evening)	
(Evening)	
Email:	

DETAILS OF YOUR PRESENT/MOST RECENT POST (Including Voluntary Work)

Title of Post and Employer	Main Responsibilities	Dates	Reason for Leaving

PREVIOUS WORK EXPERIENCE (Paid or Unpaid)

Title of Post and Employer	Main Responsibilities	Dates	Reason for Leaving
Notice required in constant	4.		
Notice required in current pos	5T:		

OTHER RELEVANT E	EXPERIENCE	
EDUCATION AND QU (Including relevant tra	ALIFICATIONS aining courses)	
Dates	School/College	Qualifications Obtained

Read the Job Description an	I in this post and what experience, qualities and skills you will bring to a Person Profile before completing this section, ensuring that the uirements are fully addressed. (Continue on a separate sheet if	it.
Signed [.]	Date:	
REFERENCES		
Please include postcode.	ferees, one of whom should be your present or most recent employer. f you have not been employed recently, one referee should know your nould be a family member or close friend. Position	
Address		
Tel:	Email	
(ii) Name	Position	
Address		
Tel:	Email	
If you are short-listed, may v	e contact your referees before interview: YES	NO
OTHER EMPLOYMENT Please note any other employment	nt you would continue with if you were to be successful in obtaining this position	on.

Date of birth	NI No
Current driving licence? Yes/No	Details of endorsements
Groups: Expiry Date:	
Are there any restrictions on you taki (If yes, please provide details)	ng up employment in the UK? Yes □ No □
If none please state. In certain circu	except those 'spent' under the Rehabilitation of Offenders Act 1974. mstances employment is dependent upon obtaining a satisfactory fords Bureau/Scottish Criminal Records Office.
LEISURE Please note here your leisure interest	s, sports and hobbies, other pastimes etc.

DECLARATION (Please read this carefully before signing this application)

- 1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
- 2. I agree that the organisation reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor). I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act.
- 3. I agree that should I be successful in this application, I will, if required, apply to the Criminal Records Bureau/Scottish Criminal Records Office for a basic disclosure. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the company any offer of employment may be withdrawn or my employment terminated.

WHERE DID YOU SEE THIS POST ADVERTISED?
Signed: Date:
may be withdrawn or my employment terminated.

PLEASE COMPLETE AND RETURN THIS FORM BY 5.00 pm, -(DATE) TO NAME AND ADDRESS OF ORGANISATION