**Job Application Form**

Please complete this form in black ink or type:

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| **1. Job applied for**   |
| **2. About you**  Title: Mr / Mrs / Miss / Ms First Name:Other Names:Surname: | Address:   Postcode:  |
| Home telephone: Mobile:  Work telephone: May we contact you at work? Yes/ No  Email Address:  |
| Date of birth:  | National Insurance No:   |
| Are you eligible to work in the United Kingdom? Yes / No   |
| Do you have any disability that may affect your application or employment? Yes/ No If yes, please give details    *We ask this question to enable us to consider any adjustments that we can make, either to the recruitment process itself or in employment, in order to assist you.*  |
| If appointed, how soon could you start the job?   |
| Have you had any previous contact, or do you have any current contact with our settings? Yes/ No  If yes, please give details  |
| **3. Your current (or most recent) employer** |
| Employer’s name:Employer’s address:Postcode:Telephone number: | Position held:Salary:Date started:Date finished:Reason for leaving: |
| **Please give a brief description of your role and responsibilities:** |

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| **4. Employment history:** Please list most recent first, continue on a separate sheet if necessary. |
| Dates | Employer | Duties undertaken |
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| **5. Education and training history including qualifications relevant to this post** |
| **Dates attended** | **Establishment and location** | **Exams/Qualifications/****Grades or Achievements** | **Date of award** |
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| **Other relevant qualifications for this role:** (Eg First Aid, Safeguarding etc) |

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| **6. Please tell us why you would like this job and how you can meet the requirements of the role:**Refer to the job advert and job description to support this, continue on a separate sheet if necessary. |
| **7. Please list two references below who are willing to give you a professional reference relating to this job role**. **References will be sought if you are shortlisted.**  |
| Referee 1  | Referee 2  |
|  Name:  Position:  Address:   Postcode: Email Address: Telephone no:  Relationship to you:   |  Name:  Position:  Address:   Postcode: Email Address: Telephone no:  Relationship to you:  |
| **8.Declaration**I declare that the information I have given on this form is correct and complete. False or misleading statements may be sufficient grounds for cancelling any agreements made, or for disciplinary action to commence. I give my consent for the referees above to be contacted. **Signed: Date:**  |
| **Please declare any criminal convictions below by filling in ONLY the relevant box. All information declared is kept in confidence.** |
| **Box A:** Complete this box if you have never had a conviction, caution, reprimand or warning OR any conviction, caution, reprimand or warning you have will not appear on your Disclosure and Barring Service certificate of criminal record, as defined in the Guidance Notes below. Note some offences will always appear on a DBS certificate.**I HAVE NO CONVICTIONS, CAUTIONS, REPRIMANDS OR WARNINGS.**I confirm that the details shown above are an accurate record of the information that will appear on my Disclosure and Barring Service Certificate and understand this will be discussed with the Interviewing Panel if successful.**Signature……………………………………………… (Applicant) Date:** |
| **Box B:** Complete this box to record details of any conviction, caution, reprimand or warning you have that will appear on your Disclosure and Barring Service certificate of criminal record, as defined in the Guidance Notes below. Note some offences will always appear on a DBS certificate**I HAVE THE FOLLOWING CONVICTIONS, CAUTIONS, REPRIMANDS AND/OR WARNINGS:**I confirm that the details shown above are an accurate record of the information that will appear on my Disclosure and Barring Service Certificate and understand this will be discussed with the Interviewing Panel if successful.**Signature…………………………………………… (Applicant) Date:** |