

Meadow Road Oulton Suffolk NR32 3AZ Tel. 01502 568855 www.theotíumcentre.co.uk

### Making Achievements Matter

**Post Applied for:** 

# **Job Application Form**

Please complete this form fully using black ink or type. Please ensure that all sections are completed and that any gaps in the employment history are recorded and explained. If you have any queries when completing this application form please call Carol Johnson on 07399 556030

### THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.

Section 1	Personal de	tails	
Last Name:		First Name:	
Address:			
Postcode:			Letters Numbers Letter
Date of Birth:		National Insurance №:	
Home Telephone Nº:			
Mobile Telephone Nº:			
E-mail address:			
Are you free to remain a in the UK with no curren restrictions?		nent Yes	No
If no, please give further include restrictions to the of hours you are able to Student Visa, 20 hours.	he number		
Driving Licence Do you hold a full, clean c	driving licence valid in	the UK? Yes	Νο
Are you willing to drive co our insurance policy and o			Νο
If you are successful you	will be required to prov	vide relevant evidence of	the above details prior to your

appointment.

## Section 2 Present Employment

**Present Employment** (If you are currently unemployed please confirm your current situation i.e. registered with JobCentre Plus, Caring for relatives, raising family)

Name of Employer:		
Address:		
Postcode:		
Post Title:		
Date of Appointment (MONTH / YEAR):	Salary:	
Department / Section:		

Brief description of duties:

Period of Notice:	End Date (MONTH/YEAR) (if no longer employed):	
Reason for leaving (if no longer employed):	Reason for leaving (if no longer employed):	

### Section 3 Previous Employment

**Previous Employment** (most recent employer first). Please cover the last 10 years and state nature of business. Please ensure that any gaps in the employment history are explained, i.e. unfit to work, unemployment, caring for relatives. When completing dates, please include the month as well as the year.

Name of Employe	r:
Address:	
	Postcode
Start Date:	End Date:
Position Held:	
Summary of dutie	es:
Reason for leavin	g:
Name of Employe	r:
Address:	
	Postcode
Start Date:	End Date:
Position Held:	
Summary of dutie	IS:
Reason for leavin	g:
Name of Employe	r:
Address:	
	Postcode
Start Date:	End Date:
Position Held:	
Summary of dutie	IS:
Reason for leavin	g:

### Section 4 Education

Qualifications obtained from Schools, Colleges and Universities. Please list highest qualification first:

College or University	Dates attended from and to	Course	Qualifications and grades obtained
School	Dates attended from and to	Subjects	Qualifications and grades obtained

Continue on a separate sheet if necessary

## **Professional, Registered or Management Qualifications**

e.g. CQSW, NVQ 4 RMA or LMC, RMNH, RMN, RGN, DMS, CMS, MBA

Please give details:

Professional/Registered/ Management Qualifications	Course Details

Continue on a separate sheet if necessary

### Section 5 Other Skills and Hobbies

Please give details of any other useful skills or talents that might bring an advantage to the position e.g. Craft skills; gardening; music etc....

### Section 6 Personal Statement

### Abilities, skills, knowledge and experience.

Please use this section to explain in detail how you meet the requirements of the Job Specification, and what you believe you can bring to the position. If you are or have been involved in voluntary/unpaid activities, please also include this information.

### Section 7 Rehabilitation of Offenders Act (1974)

This post is offered subject to a satisfactory enhanced Disclosure and Barring Service (DBS) check. ' In the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action. Information given will be completely confidential.

If you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013, please give the details below.

# Section 8 Protecting Children and Vulnerable Adults

# Enhanced Checks Are you aware of any police enquires undertaken following allegations made against you, which may have a bearing on your suitability for this Pose No Section 9 Interview arrangements Do we need to make any specific arrangements in order for you to<br/>attend the interview? If yes, please give details:

### Section 10 References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your references are.

	Reference 1			Reference 2	
Name:			Name:		
Position (Job title):			Position (Job title):		
Work Relationship:			Work Relationship:		
Organisation:			Organisation:		
Address:			Address:		
	Postcode			Postcode	
Telephone №:			Telephone №:		
E-mail:			E-mail:		
Are you willing for referee to be app prior to the interv	proached Yes	<b>No</b>	Are you willing for referee to be appr prior to the intervie	oached Yes	No

Signed		
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Date .....