



APPLICATION FOR EMPLOYMENT

*Please complete this form and email to denise@friendsandplacetogether.org.uk
 Alternatively, please complete and post to:
 Friends and Places Together, 20 Crowstone Road, Westcliff-on-Sea, SS0 8BA*

APPLICATION FOR THE POST OF:

PERSONAL DETAILS	
Surname.....	Title
Forename(s)	
Address	
.....	
.....	
I confirm that I am over 18 years of age	
Preferred telephone contact number (H)	
(W) (M)	

EDUCATIONAL DETAILS			
<i>(Give details of education since age 16. Include academic, vocational and professional qualifications and awards)</i>			
School, College, University Institute	Dates From To		Qualification and Grades
Qualifications currently being pursued	Level	Expected completion date	



TRAINING

Continue on a separate sheet if necessary

Please give details of training received or courses attended which you consider relevant to your application.

PRESENT EMPLOYMENT

Job Title:..... Date Commenced:.....

Employer's Name and Address

.....

.....

.....

Grade/Salary Scale

Present Salary

Length of Notice Required (If applicable)

Please describe the duties, and responsibilities of your present/most recent job. Indicate to whom you are/were responsible and those responsible to you.



PREVIOUS EMPLOYMENT				
<i>(Most recent first – please give exact employment dates) Continue on a separate sheet if necessary</i>				
Employer's name and address	Position held	Dates		Reason for leaving
		From	To	

Membership of Professional bodies, Societies or Institutions

If relevant to the post

Do you hold a valid Driving Licence? YES NO Are you a car owner ? YES NO

How many days absence due to sickness have you had in the last 2 years?.....

FURTHER INFORMATION

Continue on a separate sheet if necessary

Please indicate how you match the requirements of the post. Please include details of activities outside work if relevant to the post being applied for.



REHABILITATION OF OFFENDERS ACT 1974

Have you ever been convicted of any criminal offence? YES NO

If Yes, please give details

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IMPORTANT: If you are applying for a post which may involve direct contact with any vulnerable group, we will require confirmation of a current DBS check.

PLEASE NOTE that, because of the nature of the work, such employment is exempt from provisions of Section 4 (2) of the Rehabilitation of Offenders Act, 1974 (Exemptions) order, 1975. Applicants are not entitled, therefore, to withhold any information about convictions which, for other purposes, are “spent” under the provisions of the Act. Any failure to disclose such convictions and, of course, any other convictions could, if the applicant is given employment, result in dismissal or disciplinary action.

REFERENCES

Please give names and addresses of two referees, one of whom must be your present/most recent employer and one other person who would know you in connection with your work. Please indicate if you are known to your referee(s) by a different name.

1

.....

.....

Capacity in which you are known to them:.....

Telephone No:.....

Email Address:.....



2

.....

.....

Capacity in which you are known to them:.....

Telephone No:.....

Email Address:.....

References for shortlisted applicants may be taken up prior to an interview. If you do not wish your referee(s) to be contacted at this stage, place an "X" in the appropriate box(es).

DECLARATION

1. I acknowledge that an appointment, if offered, will be subject to satisfactorily medical clearance/references/compliance with the Asylum & Immigration Act and a clear DBS check where applicable.
2. I declare that the information given on this form is correct and understand that on appointment any misleading statements or deliberate omissions may be regarded as grounds for dismissal.
3. I acknowledge that any information submitted in pursuit of my application may be held on computer and manual files and therefore falls within the provisions of the Data Protection Act.

Signature:..... Date.....