

APPLICATION FORM 1 — CONFIDENTIAL APPLICATION FOR EMPLOYMENT

If you require, for the reason of a disability, for this form to be resent to you so that you can fill it in more easily, or for it to be submitted in a different format please contact the office on 0207 730 4254. Examples are a format in Braille, large print or submission via tape recording. This will in no way be detrimental to your application.

1. APPLICATION FOR

Position applied for

Available to take up employment (date)

Wage/salary required

£ per wk/mth/annum

2. PREPARED TO WORK

Full-time Part-time Shift work

3. PERSONAL DETAILS

Name

Address

Telephone numbers

Private

Work

Mobile

E-mail

Do you own a car?

Yes No

Have a current driving licence?

Yes No

Provisional Yes No Full Yes No HGV Yes No

Have you any current endorsements? (give details)

Yes No

4. HEALTH

Are you in good health?

Yes No

Are there any disabilities which may affect your application?

Yes No

Describe disabilities and

- a. any reasonable adjustments which you feel should be made to the recruitment process to assist you in your application for the job
- b. any reasonable adjustments which you feel should be made to the job itself which would enable you to carry out the job.

5. LANGUAGES

Do you speak or read a foreign language? (give details)

Yes No

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6. SECONDARY EDUCATION

School name/address	Dates		Examinations (subject/result, etc)
	From	To	

7. FURTHER EDUCATION AND TRAINING

University/College	Dates		Type of course	Subjects	Qualification or class of degree
	From	To			

8. OCCUPATIONAL QUALIFICATIONS

College/Institute or other name	Dates		Qualification/level
	From	To	

9. EMPLOYMENT

Present/last employer

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Starting date

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Leaving date

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Address

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Job title

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Duties/responsibilities	<input type="text"/>		
Reason for leaving	<input type="text"/>		
Finishing pay	£	per wk/mth/annum	
Other most recent employer	<input type="text"/>		
Starting date	<input type="text"/>	Leaving date	<input type="text"/>
Address	<input type="text"/>		
Duties/responsibilities	<input type="text"/>		
Reason for leaving	<input type="text"/>		
Finishing pay	£	Per wk/mth/annum	
Other most recent employer	<input type="text"/>		
Starting date	<input type="text"/>	Leaving date	<input type="text"/>
Address	<input type="text"/>		
Duties/responsibilities	<input type="text"/>		
Reason for leaving	<input type="text"/>		
Finishing pay	£	Per wk/mth/annum	

10. GENERAL

Interests/hobbies (Give details of pastimes, sports, etc)

Offices held in social/sports clubs, etc

Public duties (JP, local councillor, etc) undertaken

Have you ever been convicted of a criminal offence? (Declaration subject to the Rehabilitation of Offenders Act 1974) Yes No

Membership of professional organisation(s)

Published papers, articles, monographs, etc (give details including dates)

If offered this position will you continue to work in any other capacity? (Give details) Yes No

11. WORK PERMITS

Are there any restrictions to your residence in the UK that might affect your right to take up employment in the UK?

Yes No

If you are successful in your application would you require a work permit to work in the UK?

Yes No

12. COMMUNITY/VOLUNTEER EXPERIENCE

Name and address of organisation	Dates		Position/title	Duties
	From	To		

13. PERSONAL REFEREES

Work reference - not members of your own family

Name

Address

Organisation

Occupation

Telephone number

Work, personal or educational

Name

Address

Organisation

Occupation

Telephone number

14. EMERGENCY CONTACT DETAILS

If you wish to do so, please give details of next of kin or person who can be contacted in an emergency.

Name

Address

Relationship

Telephone numbers	
Work	Private

15. ADDITIONAL PERSONAL DETAILS

Applicants are requested to tick the relevant boxes below to enable the organisation to monitor its equal opportunity policy. Monitoring is recommended by the Codes of Practice for the elimination of racial discrimination and for the elimination of discrimination on the grounds of sex and marital status. This information is used for no other purpose and will be treated as confidential.

White – British	<input type="checkbox"/>	Mixed – White and Black Caribbean	<input type="checkbox"/>	Asian/Asian British – Indian	<input type="checkbox"/>
White – Irish	<input type="checkbox"/>	Mixed – White and Black African	<input type="checkbox"/>	Asian/Asian British – Pakistani	<input type="checkbox"/>
White – Other	<input type="checkbox"/>	Mixed – White and Asian	<input type="checkbox"/>	Asian/Asian British – Bangladeshi	<input type="checkbox"/>
		Mixed – Other	<input type="checkbox"/>	Other Asian Background	<input type="checkbox"/>
Black/Black British – Caribbean			<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Black/Black British – African			<input type="checkbox"/>	Other	<input type="checkbox"/>
Black/Black British – Other			<input type="checkbox"/>	Male	<input type="checkbox"/>
				Female	<input type="checkbox"/>

National Insurance number

16. RECRUITMENT POLICY

It is the organisation's policy 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, colour, national origin, sex, sexual orientation, religion or belief or marital status or disability.

I authorise the organisation to obtain references to support this application once an offer has been made and accepted and release the organisation and referees from any liability caused by giving and receiving information.

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

Signature

Date

17. FOR OFFICE USE ONLY

Starting date

Job offered

Pay

Hours of work

Department/supervisor

Payroll number

Recruitment source	<input type="text"/>
National Insurance number	<input type="text"/>
P45 or P46	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pension entry date	<input type="text"/>
Reference requested	<input type="text"/>
Driving licence	<input type="text"/>
Birth certificate	<input type="text"/>
Proof of qualifications	<input type="text"/>
Union membership	<input type="text"/>

18. INTERVIEWER'S USE ONLY					
	1	2	3	4	5
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intelligence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Co-operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General impression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other comments	<input type="text"/>				
Signature (1)	<input type="text"/>				
Signature (2)	<input type="text"/>				