



Employee Application Form

Post Applied For

Where did you see this vacancy advertised?

Surname	First name	
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Address

Post Code

Email address

Home Phone No	Mobile Phone No
<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>

What hours can you work? (Please tick)	Full time 8 hrs plus 1 hour lunch	Part time AM 7.45am–1.00pm	Part time PM 12.30pm-6.00pm or 1.00pm-6.00pm	Before and After School Club 7.30am-9.00 am and 3.00pm – 6.00 pm
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Qualifications

Please detail all qualifications that you may have. It is the Company's Policy to verify the qualifications of all successful job applicants and you may be asked at a later stage in the recruitment process for your consent to checks being carried out. (For additional qualifications please provide these on a separate sheet).

Qualification	Where Gained	Date	Please list specific grade achieved

Career History

Please give details of your previous employment history starting with the most recent

1st Employer & Address			
Job Title		Salary	£

Summarise the nature of your work and job responsibilities/achievements (if relevant)

Date Joined Company		Date Left	
Reason for Leaving			

2nd Employer & Address			
Job Title		Salary	£

Summarise the nature of your work and job responsibilities/achievements (if relevant)

Date Joined Company		Date Left	
Reason for Leaving			

3rd Employer & Address			
Job Title		Salary	£

Summarise the nature of your work and job responsibilities/achievements (if relevant)

Date Joined Company		Date Left	
Reason for Leaving			

OTHER DETAILS

What is the notice required in your present post?

Is your present post your sole regular employment?

Yes	No
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Are you a British subject or a national of any EU country?

If not, do you have the right to work in the UK and a current work permit?

If so, please state the expiry date of your right to work in the UK and/or your work permit.

DISABILITIES

Do you require any special arrangements to be made for your [interview/assessment test] on account of a disability?

Yes	No
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If "yes", please give brief details of the effects of your disability on your day –to-day activities, and any other information that you feel would help us to accommodate your needs during your [Interview/assessment test] and thus meet our obligations under the Equality Act 2010:

CONVICTIONS

Have you ever been convicted of a criminal offence? If so please give details of any unspent convictions. As this post is one covered by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 both spent and unspent convictions must be declared.

GENERAL INFORMATION - Is there any other information you would like to add about yourself? (you may continue to write on a separate sheet)

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REFEREES

Please submit 2 referees (who can comment on your suitability to work with young children) 1 of which must be a previous employer:

Name:			
Address			
Post Code	Telephone Number		
Email			

May this reference be taken up before interview / recruitment? Yes / No

Name			
Address			
Post Code	Telephone Number		
Email			

May this reference be taken up before interview / recruitment? Yes / No

DECLARATION

1. I acknowledge that an appointment, if offered, will be subject to satisfactory medical clearance. I am currently in good health.
2. I declare that I have not received any caution, warning, been reprimanded for any offences or been convicted of any criminal offence spent or otherwise (the post is exempt from the provisions of the Rehabilitation of Offenders Act)
3. I declare that the information given on this form is correct and understand that on appointment any False, incomplete or misleading statements or deliberate omissions may lead to dismissal.
4. I hereby agree to you seeking/releasing confidential references to anyone who so requests it. I understand that I may revoke this consent at any time and that I have the right under the Data Protection Act to request sight of a copy of each reference.

Signature

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Date

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FOR OFFICE USE

Shortlist / Decline with reason		
Date of interview		
Panel members		
Decision with reason		
Vacancy	(Qualified/Unqualified)	FFN
Rate per hour	£	Commencement Date
Hours per week		