

Job Application Form Employment Details

Job applied for:

Please type or write in bold.

Confidential

1. PERSONAL DETAILS (BLOCK CAPITALS PLEASE)

Surname:		First names:	
Former surnames if different:		Preferred Name or Title (Optional):	
Address: Town Post Code		Tel No (home):	
		Tel No (business):	
		Tel No (mobile):	
		Fax No:	
E-Mail address:		Nat. Insurance No:	
Nationality:		If you are not a British passport holder or a European Citizen, or you do not have the permanent right to remain in the UK, you will require a work permit.	
Do you need a work permit to be employed in the UK?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If you already have a work permit, when does it expire? (Please note that your current work permit may not be valid for this post.)	
Where did you learn of the vacancy?			
Preferred work arrangements - please tick	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	If part-time, please the part-time days/hours you are available to work:

2. EDUCATION AND PROFESSIONAL QUALIFICATIONS

(Original documents as proof of qualification will be required at interview.)

Secondary School / College / University	Dates		Examinations taken	Date	Result
	From	To			

Professional Qualifications currently held: how obtained, grade and date

Other relevant Educational or Training Courses, with dates

What IT packages do you work with? Please specify whether you have achieved basic, intermediate or advanced level proficiency.

3. PRESENT JOB

Job Title		Salary	
Name of Employer:		Business of Employer:	
Address:		Date Commenced:	
		Date Ended (if applicable):	
Town	Post Code		
Please outline your responsibilities, to whom you are responsible and staff responsible to you (if applicable):			
Reason for leaving or wishing to leave:			
Period of notice required to terminate present employment:			

4. PREVIOUS EMPLOYMENT

(Please use continuation sheet if necessary.)

Name and Address of Employers	Position held	Reason for leaving	Dates of employment

Description of duties:

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Description of duties:

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Description of duties:

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Description of duties:

Have you had any gaps of more than 3 months in your employment? Yes No
If yes, please provide relevant details:

5. YOUR SKILLS, ABILITIES, KNOWLEDGE, AND EXPERIENCE

Please consider the **person specification for the job** and provide a statement showing how you meet the requirements; this is most easily done by taking each point in turn and providing specific information.

6. YOUR REASON FOR APPLYING FOR THE JOB

Please state why you are interested in this job and working for us.

7. OTHER INFORMATION

What activities outside work or voluntary work interest you? (please state any positions held that you consider relevant.)

Do you hold a current full driving licence?

Yes No

Do you own a car?

Yes No

Foreign Languages

What languages do you speak?

Equality Act 2010

Please note that this information will not be considered in any decision about employment but will be used solely to make reasonable adjustments for the recruitment/selection process.

Do you consider yourself to be disabled under the Equality Act? (This is defined as "a physical or mental impairment which has a substantial and long term adverse on your ability to carry out normal day to day activities".)

Yes No

If selected for interview, do you require any assistance/adaptations to help you attend?

Yes No

If Yes, what assistance/adaptations do you require?

Rehabilitation of Offenders Act 1974

Have you any convictions that are not spent under Rehabilitation of Offenders Act?

Yes No

If Yes, please provide further details:

Disclosure and Barring Service (DBS)

Depending on the work you do, you may be required to obtain an enhanced or standard check from this service. Do you have any objection to a check being made?

Yes No

8. REFERENCES

Referee 1 (the minister of your church)

Referee 2 (previous employer)

Title (Mr, Mrs etc):		Title (Mr, Mrs etc):	
Full Name:		Full Name:	
Job Title:		Job Title:	
Organisation:		Organisation:	
Address:		Address:	
Town	Post Code	Town	Post Code
Tel No:		Tel No:	
E-mail address:		E-mail address:	
Fax No:		Fax No:	
Please state if we may obtain this reference prior to interview.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please state if we may obtain this reference prior to interview.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. CHRISTIAN LIFE AND EXPERIENCE

Please describe the beginning and growth of your own faith as a Christian.

9. DECLARATION

I affirm that I believe in the Nicene Creed. I declare that the information given in this application form is true and complete. I understand that if I have given any misleading information on this form or made any omissions, this will be sufficient grounds for terminating my employment. I agree to the information given being stored either on paper records or a electronically under the **General Data Protection Regulations 2018**. I understand that it will be processed solely in connection with my application for employment. When I leave, I agree that only information about my dates of employment and my job title will be supplied to other employers if requested by them.

If I am offered a job, the earliest date I could start is:

Signature:		Date:	
Name:			