



Confidential

APPLICATION FOR EMPLOYMENT

Please complete all the sections of this form in black ink, biro and capitals. All sections should be completed in detail.
Do not state 'refer to C.V.'

You will be required to complete Appendix A

Job title of post applied for:	Ref No:
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Please indicate if you are interested in either:	full time working	<input type="checkbox"/>	casual employment	<input type="checkbox"/>
	part time working	<input type="checkbox"/>	voluntary work	<input type="checkbox"/>

Where did you see this vacancy advertised?
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Personal Details	
Surname:	Forenames:
Home Address:	Title (Mr/Mrs/Ms/Miss/other)
	Telephone numbers:
	Home:
	Work: Mobile:
Postcode:	E-Mail:
	Can you be contacted at work Y / N

Rehabilitation of Offenders Act 1974, and as amended
The post for which you have applied is not protected by the provisions of the Rehabilitation of Offenders Act 1974.
Have you ever been convicted of any criminal offence, and/or been issued with a fixed penalty notice for an endorseable offence, and/or been made subject to an order under the Mental Health Acts (Section 51)?
Yes / No
If yes, please give details of the conviction(s) and the date(s) (If you have criminal convictions, which are not 'spent' you must disclose these convictions). You are also required to complete Appendix A.
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Do you own a car? YES /NO?

Do you have a current driving licence: Provisional Full HGV No

Do you have any current endorsements? (please give details)

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Education and Training

Please give details of the educational qualifications you have obtained from school, college, university etc, that are relevant to the post. Shortlisted candidates will be expected to provide original certificates. Sometimes formal qualifications will be necessary but in other cases formal qualifications will not be required and other relevant experience and training will be considered whether it be at work, in the home or your social life and you can give details of these in the section on *further supporting information*.

Name and address of School, College, University	From	To	Qualification	Result/grade achieved

Occupational qualification/membership of professional organisation

Please give details of your membership of institutes or organisations. Again shortlisted candidates will be expected to provide original certificates or details.

College, University Institute or other	From	To	Qualification/level	Was this achieved by examination?

Other Courses attended	Level Achieved	From	To	Details of courses

Employment details *(please include any work experience paid or unpaid)*

Particulars of Present or Most Recent Employment

Employer's name and address

Job title

Date appointed

Present salary (or salary when employment ceased)
£

Notice required/
Date employment ceased

Reason for leaving

Briefly Outline Duties and Responsibilities

Employment history (where possible, please go back ten years)

Employer's name and address

Job title and brief outline of duties

From

To

Reason for leaving

Employer's name and address	Job title and brief outline of duties	From	To	Reason for leaving

Further Information in support of your application

Include details of any relevant experience gained through previous employment, similar activities (especially with regard to centres you may have worked at), voluntary work, leisure activities or your home life, including any other training you feel would support your application. If you feel you have to use additional paper to complete the application, please limit yourself to one extra A4 page.

If you were offered this post would you intend to pursue any other paid / unpaid work? **Yes / No**

If yes, please give details:

Employer:

Nature of work:

Number of hours per week:

Do you have any connection with, or are related to, anyone working at The Fircroft Trust? **Yes/ No**

If Yes, Name Relationship

References

We will require two satisfactory references before a job offer can be made. Please give the names and addresses of two referees who can provide professional or education (not character) references. At least one of your references must be from your current or most recent employer. Please do not use friends or relatives as referees.

1. Name:

Address:

Post Code:

Telephone number:

Please tick if reference can be taken up prior to interview

How long, and in what capacity have you known this person:

.....

2. Name:

Address:

Post Code:

Telephone number

Please tick if reference can be taken up prior to interview.

How long, and in what capacity have you known this person:

.....

Pre Employment Declaration

Please read this declaration carefully. Remember to sign and date it.

My National Insurance Number is:

I do / do not (*please delete as appropriate*) require a work permit to take up employment in the UK.

Under Section 8 of the Asylum and Immigration Act 1996 the organisation must check the work status of all people considered for employment. If you are offered a position, you will be required to produce one of the documents listed in the Asylum and Immigration document accompanying any such offer.

I understand that any false or misleading information given in this application may render my contract of employment, if I am appointed, liable to termination.

I accept that relevant checks will be made with all relevant bodies and registers that includes the Criminal Records Bureau to ensure my suitability for the position and to ensure both the protection of children, young persons and vulnerable adults. I also understand that a criminal record, that includes the disclosure of spent convictions, may not necessarily be a bar to the continuance of my application if it is considered not relevant.

I understand that if there are any discrepancies or queries on the information supplied from the checks made or with other information supplied during the recruitment process that give cause for concern, The Fircroft Trust will investigate the matter further and will discuss the discrepancy with me. If it is found that the information is correct and is of a serious nature, then my application will be terminated immediately.

I understand that I may be asked to provide evidence of any academic or professional qualifications listed in the application form.

I declare that to the best of my knowledge the information submitted in my application and in any accompanying document(s) is correct and can be treated as part of any subsequent contract of employment. I give my consent to The Fircroft Trust making any other reasonable enquiries as it thinks fit in respect of the information and details given in this application.

I also agree that for the purposes of the Data Protection Act 1998, certain personal information given on this form and on any accompanying documents, including any sensitive data of which I am the subject can be kept on manual and/or computer systems for sole use by the Company. This includes divulging personal data to third parties where the Company is legally obliged to do so. I understand that all personal details will be held in strict confidence and will not be divulged to any other individuals or organisation for any other purpose.

Signature: Date:

Please print your name:

When you have completed the form please return to the following address, ensuring that all the paperwork is complete:

The Chief Executive
The Fircroft Trust
96 Ditton Road
Surbiton
Surrey
KT6 6RH

If you have any further queries please call the following number for assistance: Tel: 020 8399 1772

APPENDIX A

The Fircroft Trust is an equal opportunities employer. Recruitment, selection and promotion procedures will be monitored to ensure that individuals are selected, promoted and treated on the basis of their relevant experience and abilities. To assist The Fircroft Trust in monitoring the operation of its equal opportunities policy, and for no other reason, please answer the following questions. **This information will be detached before your application is forwarded for shortlisting.**

Surname name:	Forenames:
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Date of birth:	Age:	<input type="checkbox"/> Female	<input type="checkbox"/> Male
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Do you consider yourself to have a disability *? **Yes / No**

If yes, give details:

Do you have any particular access or other requirements regarding interview or other selection arrangements? **Yes / No**

If yes, give details:

** Under the Disability Discrimination Act 1995, a disability is defined as a physical or mental impairment which has a substantial and long term adverse effect on your ability to carry out normal day to day activities such as those involved in mobility, manual dexterity, physical co-ordination, speech, hearing, eye sight or communication, or a permanent condition which is controlled by medication.*

Absences from work
 Please give details of absences work through sickness or other reasons over the last 12 months. Indicate number of occasions and number of day's absence at each instance. Please specify reasons for absence.

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Please state your gender:

Male Female

Please state your ethnic group:

White <input type="checkbox"/>	Indian <input type="checkbox"/>
Black-Caribbean <input type="checkbox"/>	Pakistani <input type="checkbox"/>
Black-African <input type="checkbox"/>	Bangladeshi <input type="checkbox"/>
Black – Other* <input type="checkbox"/>	Chinese <input type="checkbox"/>
* Please state	Other* <input type="checkbox"/>

Please state your status:

Single <input type="checkbox"/>	Married <input type="checkbox"/>
Living with partner <input type="checkbox"/>	Divorced <input type="checkbox"/>
Widowed <input type="checkbox"/>	Separated <input type="checkbox"/>

Please state your age:

16-20 <input type="checkbox"/>	21-30 <input type="checkbox"/>	31-40 <input type="checkbox"/>
41-50 <input type="checkbox"/>	51-60 <input type="checkbox"/>	61-54 <input type="checkbox"/>
over 65 <input type="checkbox"/>		

THANK YOU FOR YOUR ASSISTANCE IN COMPLETING THIS FORM