

## **Private & Confidential**

Applications are invited from people from all sections of the community, irrespective of their marital status, sexuality, age, gender, disability, race, colour, nationality, ethnic, national origins, or religion, who have the necessary attributes to carry out the job.

Post applied for:	
Full name:	
Address:	
Postcode:	
Tel number/s:	
Email address:	
Do you have the ability to travel to fulfil the requirements of the post?	
QUALIFICATIONS/ EDU	JCATION

Please give details of the **qualifications** you have achieved with details of training providers and dates:

Please give details of relevant **short courses** you have attended with details of training providers/ dates:

## **EMPLOYMENT HISTORY**

Current employment	From	То	Main Duties	Reason for leaving
Past employment (continue on a				
separate sheet if necessary)				

## SUPPORTING STATEMENT

Please indicate your reasons for applying for the post. You are also invited here to give any additional information which you wish to have taken into account in support of your application, and to list hobbies, spare time activities, interests, membership of voluntary organisations etc.

(continue on a separate sheet if necessary)

## REFERENCES

Please giv	e name,	address,	telephone	number/s	and ema	il address	of two re	eferees, c	one of who	m should
be your pr	esent/mo	ost recent	employer.	A minimu	m of five	years mu	st be pro	vided for,	including	any gaps
in employr	nent.									

References will be taken up before the interview.

1.

2.

Do you have a disability?

Yes

No

We will make reasonable adjustments to help a person with a disability through the application & selection process and, if successful, to assist you in carrying out the duties of your job. Please see the applicant guidance notes for further information.

How did you find out abo	out the post?	
DECLARATION		

- 1. I acknowledge that an appointment if offered will be subject to satisfactory medical clearance. Currently I am in good health;
- 2. I confirm that I do not live with anyone who has been disqualified to work with children.
- 3. I confirm that there is nothing in place to prevent me from working with children.
- 4. I declare that the information given on this form is correct and understand that on appointment any misleading statements or deliberate omissions will be regarded as grounds for disciplinary action.

Signature	Date
Shortlisting Date	
Shortlisted Y/N	
Panel members	
Date of interview	
Comments	