

Post Title:	Application Date:
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## Personal Information

Title:	First Names:	Surname:
Address:	E-mail Address:	
	Home Telephone Number:	
	Mobile Telephone Number:	
Post Code:		
Do you hold a current/active driving license?	Do you own a car?	
How did you hear about this opportunity?		

## Health

Please give details of any periods of long prolonged illness, operations, or medical supervision during the last five years:

Are you a registered disabled person?

We welcome applications from people with disabilities. If short listed for the position, we will ask you if any arrangements are required for the selection process. On the day there will be the opportunity to discuss any adjustments that may be required to enable you to carry out the job.

## Present Employment

Post Title:	Grade:
Name and Address of Employer:	Salary:
	Date Appointed:
	Noticed Required:
Post Code:	

**Previous Employment**

From	To	Employer	Position	Salary

**Education**

From	To	School, College, University etc	Examinations Passed

**Professional Qualifications**

Qualifications:

Training Relevant to the Position:

## Employment Details

*Please give details of your present duties indicating who you report and any staff for whom you are responsible.*

## Additional Information

*Please explain your reasons for applying for this post and specific career and personal achievements that make you a suitable candidate.*

## Personal Skills

Please give examples of skills and competencies you possess, relevant to the position you have applied for.

## Referees

Please name two referees, one should be your present employer. Unless you state otherwise it will be assumed that you give permission to contact these referees before an interview is given.

Name:	Name:
Occupation/Post:	Occupation/Post:
Contact Details (Address/E-mail):	Contact Details (Address/E-mail):

## Rehabilitation of Offenders Act 1974

Have you any unspent convictions?			
If YES, please give details:			
Date:	Court:	Nature of Offence:	Sentence:

## Declaration

I declare that the information given is true and understand that the canvassing of members or officers directly or indirectly will invalidate this application.

Signature:

Date: