JOB APPLICATION PERSONAL INFORMATION FORM

TO BE COMPLETED IN ADDITION TO THE SUBMISSION OF A CV

POST APPLYING FOR**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PERSONAL DETAILS

|  |  |  |
| --- | --- | --- |
| Title Surname | | |
| Forenames |  | Telephone (home) |
| Address |  | Telephone (mobile) |
|  |  | Email Address |
|  |  |  |
| Postcode |  | Date of Birth |

RELEVANT QUALIFICATIONS OR PROFESSIONAL MEMBERSHIP

Examination level

(eg GCSE/ ‘A’ Level / Degree/ NVQ) Subject(s) Grades/Class

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

PRESENT OR MOST RECENT EMPLOYMENT

Employer’s name, address

and type of establishment Job Title

|  |  |  |
| --- | --- | --- |
|  |  | Current Salary Last Bonus |
|  |  | Date started in post |
|  |  |  |
|  |  | Notice required |
|  |  |  |
|  |  | Date left if no longer employed |
|  |  |  |
| Postcode |  | Reason for leaving/seeking to leave |
| Telephone |  |  |

Briefly describe your main duties and responsibilities in the above job.

PAST EMPLOYMENT

Please give details of all your previous work experience, putting the most recent first.

|  |  |  |  |
| --- | --- | --- | --- |
| Employer’s name and address | Dates employed from/to month/year | Job held and brief outline of duties | RR Reason(s)  Fo for leaving |
|  |  |  |  |

TRAINING

|  |  |
| --- | --- |
| Course title or area of training relevant to this post | Date |
|  |  |

WORKING ELIGIBILITY

Are you lawfully resident and eligible to take employment in the UK Yes **❑** No **❑**

Do you require a work permit? Yes **❑** No **❑**

DRIVING

Do you hold a current full driving licence? Yes **❑** No **❑**

Please state any current convictions

Do you have access to a suitable vehicle that can be used for business purposes? Yes **❑** No **❑**

HEALTH AND GENERAL ATTENDANCE

Please give details of the number of days and occasions you have been absent from work in the past

two years as a result of ill health.

Please give details of any illness that has caused you to be absent from work for 5 or more consecutive

days during the past two years.

CRIMINAL CONVICTIONS

Do you have any criminal convictions? Yes **❑** No **❑**

*If Yes*please give details on a separate sheet, this should exclude any spent convictionsunder Section 4(2) of the Rehabilitation of Offenders Act 1974, unless the job for which youare applying involves working with vulnerable adults or children in which case cautions,bindovers, pending prosecutions, spent and unspent convictions must be declared.

OTHER INFORMATION

(please detail any other information we should be aware of relating to your application and your ability to fulfil the role and duties applied for which are not included above)

REFERENCES

Please give the names and addresses of two referees (not friends or relatives)

including telephone numbers.

Referee Referee

|  |  |  |
| --- | --- | --- |
| This should be your current or most recent line manager |  | This should be a previous employer |
| Name |  | Name |
| Referee’s job title |  | Referee’s job title |
| Address |  | Address |
|  |  |  |
|  |  |  |
| Postcode |  | Postcode |
| Telephone |  | Telephone |
| Contact before interview? Yes No |  | Contact before interview? Yes No |
|  |  |  |

DECLARATION

The information provided on this form will be used in the recruitment and selection process and may

be disclosed to all those who need to see it. It will also form the basis of the confidential personnel

record of the successful candidate..

*I hereby declare that to the best of my knowledge, all the information given by me is correct, and that I possess all the qualifications I have listed on this form. I confirm that I do not object to the information collected on this form being transferred onto computer for the purpose of anonymous statistical reporting, in accordance with statutory requirements. I agree that Tangible Branding Ltd has the right to validate any of the information provided.*

*I understand that any false statements could result in my dismissal if appointed.*

Signature Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_