

Employment Application Form

Post applied for: _____

How did you learn of the vacancy: _____

Date & reference number: _____

Personal Details

First Name(s): _____

Surname: _____ Title: _____ (Mr, Mrs, Miss, Ms etc)

Address: _____

Postcode: _____ Gender: Male Female (please tick)

Telephone: Home: _____

Mobile: _____

Work: _____

May we call you at work? Yes No (please tick)

Email Address: _____

National Insurance Number: _____

Date of Birth: _____ Age: _____

If you are currently employed, how much notice are you required to give? _____

You are required to declare all secondary employment. Do you plan to work in addition to being employed by Highpoint if appointed? Yes No (please tick)

Are you, to your knowledge, related to a Committee Member or existing member of staff at Highpoint or any associated companies? Yes No (please tick)

If yes, please give details: _____

Have you ever previously been employed previously by Highpoint or any associated companies?
 Yes No (please tick)

If yes, in what capacity were you employed? _____

Career History

Please give details of all career history. Please start with the most recent first.

Name and Address of Employer	Dates of Employment (from/to) including month and year	Position Held and Responsibilities	Reason for Leaving the company and/or seeking new employment

Education & Qualifications

Please give details of all education from the age of eleven years, including evening classes resulting in qualifications.

Dates (from/to)	Name of Establishment	Subjects or Qualifications taken	Results

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Membership of Professional Bodies: _____

Do you have a current full driving licence? Yes No (please tick)

Are you a car owner? Yes No (please tick)

Please give details of any endorsements: _____

Medical Details

How many days have you taken off from work due to sickness in the past two years? _____

Please outline the nature of the illnesses:

Rehabilitation of Offenders Act

Have you ever been convicted of a criminal offence? Yes No (please tick)

If yes, you are required to give details if the post for which you are applying is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974, by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986. The job description will state whether or not this is the case. Please provide details:

Date	Offence	Sentence

Personal Statement

Please use this space below to indicate why you consider yourself to be suitable for the post. Please complete as fully as possible as this information will be used for short-listing purposes (please continue onto a separate sheet and attach if necessary)

References

Please give details of two people to whom we may apply for a reference – these **must** include your present and most recent employer (unless you have never been employed). References will not normally be taken up until an offer of employment has been made.

Name: _____

Name: _____

Their Position: _____

Their Position: _____

Address: _____

Address: _____

Telephone number: _____

Telephone Number: _____

In what capacity does this referee know you?

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Declaration

I declare that all information given in support of my application is, to the best of my knowledge and belief, true and complete. I understand that if it is subsequently discovered that any statement is false or misleading, it may lead to disqualification or, should I be appointed, that I may be dismissed.

Signed: _____ Date: _____