

Application Form

Please complete this form clearly in type or black ink and return it to the address shown above for the attention of Chris Trevor, or send by email to chris.trevor@stotengillam.co.uk.

1. Personal Details

Title: (Mr/Mrs/Miss/Ms/Dr/Other)

Gender: (Male | Female)

First Name:

Surname:

2. Address Details

Home Address:

Town:

County:

Postcode:

3. Telephone Numbers

(Please include any international dialling codes for overseas numbers)

Home Phone Number:

Mobile Number:

Fax Number:

Email:

4. Other Personal Details

Citizenship(s):

UK National Insurance Number, (NI):

Do you require a work permit to work in the UK? Yes | No

If you answered "Yes" to the above question, have you been granted a work permit? Yes | No

Do you hold a full current UK driving licence? Yes | No

5. Employment and Salary Requirements

Please specify your minimum salary requirement, £ per annum

Current Notice Period:

Date you are available from:

Preferred hours of work if not full-time:

6. Educational and Professional Qualifications

In the space below please outline your educational and professional qualifications:

(Please start with your most recent education and qualifications)
(You should include dates for each school and qualifications and grades obtained)
(Please use a additional sheet of paper if there is insufficient space)

Please specify your highest qualification level:

Please specify your subjects studied:
(And results)

University / College / School:
Date of graduation:

7. Employment History

Please list your last three jobs starting with your current or most recent employment.

Employer One

Start Date:

End Date:

Employer's Name:

Employer's Address:

Your role:

Your job description:

Your Achievements:

Employer Two

Start Date:

End Date:

Employer's Name:

Employer's Address:

Your role:

Your job description:

Your Achievements:

Employer Three

Start Date:

End Date:

Employer's Name:

Employer's Address:

Your role:

Your job description:

Your Achievements:

8. Your Key Skills

Please outline your relevant skills, including IT skills, languages and participation in your relevant profession. (Please use an additional sheet of paper if there is insufficient space)

9. Attendance Record

Please state how many days you have been absent from work, (other than authorised holidays) during the past 12 months. Give reasons for any absence.

_____ day(s)

10. Additional Personal Information

Please tell us about yourself, your interests, hobbies and sports.

11. Criminal Offences

Do you have any previous criminal convictions, which are not "spent" under the Rehabilitation of Offenders Act 1974? Yes | No

12. Disability

Do you have a disability? Yes | No

If Yes, what arrangements, if any, can we make for you to participate fully in the recruitment process and to undertake the position for which you are applying?

13. References

Please give names and addresses of two referees who can confirm your ability to meet the responsibilities of the job for which you are applying. Where possible one of the referees should be your present or most recent employer.

Referee One

Name:

Position:

Address:

Telephone:

Fax:

Email:

Referee Two

Name:

Position:

Address:

Telephone:

Fax:

Email:

Please note that we will not write for references without your permission.

14. Data Protection Notice

The information gathered from this application form will be held by the organisation in accordance with our Privacy Notice for job applicants which can be viewed at <https://www.stotengillam.co.uk/about-us/JobApplicants-privacy-notice.pdf>.

15. Declaration

By completing this declaration, I consent to the collection, recording and use of the information, which I have provided in the way described above. I declare that to the best of my knowledge and belief all the information I have given on this form is correct and can be treated as part of any subsequent contract of employment.

Signed: _____

Date: _____

If you would like any further information or guidance on completing this application form please contact:

*Margaret Smith or Karen Snushall
Tel 01582 608601*