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**Application for Employment**

Using a standard application form during a recruitment process will ensure that all necessary information is received from each applicant at the start of the process, helping to prevent any unnecessary delays.

The form has space for the employee to provide details on their education and full employment history, including their job title, duties and reason for leaving.

The form also asks the employee to provide details of two referees and to confirm whether they consent to the referees being approached before interview.

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| **Return this form to:** | | Hayley Dyer People & Quality Advisor  Hayley.dyer@wgdavies.com |
| **Reference Number: Position Applied for:** | |  |
|  | **Personal Details** | |
| **Name** | Title: | |
| Name Forename(s): | |
| Surname: | |
| **Contact Information** | Address: | |
| Post Code: | |
| Email: | |
| Tel No. (Home): | |
| Tel No. (Mobile) | |
| N.I Number: | |

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| **Driving Licence** | | |
|  | Yes/No | |
| Groups: | |
| Expiry Date: | |
| Details of Endorsement: | |
| **Are there any restrictions on you taking up Employment in the UK?** | | |
|  | Yes/No: | |
| If Yes, Please Provide Details: | |
| **Educations** | | | |
| Schools/College/University Name | | | Qualification Gained |
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| **Employment History (please complete in full and use a separate sheet if necessary)** | |
| **Last/Current**  **Employment** | Name of Employer: |
| Address: |
| Dates of Employment: |
| Job Title: |
| Duties: |
| Rate of Pay: |
| Reason for Leaving: |
| Notice Period: |
| **Previous Employment**  **#2** | Name of Employer: |
| Address: |
| Dates of Employment: |
| Job Title: |
| Duties: |
| Rate of Pay: |
| Reason for Leaving: |

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| **Previous Employment #3** | Name of Employer: |
| Address: |
| Dates of Employment: |
| Job Title: |
| Duties: |
| Rate of Pay: |
| Reason for Leaving: |

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| **References (please note here two persons from whom we may obtain both character and work references)** | |
| **Reference #1** | Title: |
| Forename(s): |
| Surname: |
| Address: |
| Post Code: |
| Contact No. |
| May we approach the above prior to interview?  Yes/No |
| **Reference #2** | Title: |
| Forename(s): |
| Surname: |
| Address: |
| Post Code: |
| Contact No. |
| May we approach the above prior to interview?  Yes/No |

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| **Criminal Record** | |
| Please note any criminal convictions except those 'spent' under the Rehabilitation of Offenders Act 1974. If none, please state. In certain circumstances employment is dependent upon obtaining a satisfactory Disclosure & Barring Certificate from the Disclosure & Barring Service/Disclosure Scotland. | |
| **Data Protection** | |
| 1. We are aware of our obligations under data protection legislation, including the obligation to collect only the data that is required for our specific purpose. The information collected in this application form is specific to our recruitment exercise and necessary for the performance of the role that you have applied for. If you are recruited for the role you have applied for, or any other role you are offered by us, the information provided will then be used for the purposes of your employment with us, together with further information collected upon recruitment for those purposes. 2. We will treat all personal information about you with utmost integrity and confidentiality. Our data protection policy sets out our approach to ensuring that your data is processed in line with the data protection principles within current data protection legislation. | |
| **Declaration (please read this carefully before signing this application)** | | |
| 1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered. 2. I understand that the company will inform me of their intention to contact my doctor with a view to obtaining a medical report, should they require further medication information, and that my agreement will be sought before my doctor is contacted. I also understand that the organisation reserves the right to require me to undergo a medical examination. In addition, I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with data protection legislation. | | |
| Signed: | | Date: |