

APPLICATION FORM

CONFIDENTIAL

Before completing this form, please read the accompanying guidance notes. Please write clearly in black ink or type.

Post Applying For:	
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1. PERSONAL DETAILS (BLOCK CAPITALS PLEASE)

Surname:		Initials:	
Former surnames (if different):		Preferred Name or Title (Optional):	
Address:		Tel No (home):	
		Tel No (business):	
		Tel No (mobile):	
		E-Mail address:	
Nationality:		National Insurance No:	
Do you need a work permit to be employed in the UK?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If you already have a work permit, when does it expire? Note: Documentary evidence will be requested from the successful candidate before starting employment to demonstrate your right to work in the UK.
Where did you learn of the post?			

2. EDUCATION AND PROFESSIONAL QUALIFICATIONS
 (Original documents as proof of qualification will be required at interview.)

Secondary School / College / University	Dates		Examinations taken	Date	Result
	From	To			

4. PREVIOUS EMPLOYMENT

(Please use continuation sheet if necessary.)

Employers Name & Address	Position Held	Reason for Leaving	Dates To-From	Final Grade/Salary
1.				

Description of duties:

2.				
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Description of duties:

3.				
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Description of duties:

4.				
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Description of duties:

Have you had any material gaps in your employment? Yes No
If yes, please provide relevant details:

5. RELEVANT SKILLS, ABILITIES, KNOWLEDGE, EXPERIENCE AND YOUR REASONS FOR APPLYING FOR THIS JOB (continue on a separate sheet if necessary)

6. OTHER INFORMATION

What activities outside work interest you? (State any positions held you consider relevant.)

Do you hold a current driving licence?

Yes

No

Do you own a car?

Yes

No

Health

Please state the number of days sickness absence in the last 2 years:

NB: If offered employment, candidates *may* be required to complete a Pre-Employment Medical Questionnaire.

Disability Discrimination Act 1995

Do you consider yourself to be disabled under the Disability Discrimination Act?

Yes

No

If Yes, are there any adjustments that you think we could make to overcome a disability in relation to the essential requirements of this job?

Yes

No

If Yes, please provide further details:

If selected for interview, do you require any assistance/adaptations to help you attend?

Yes

No

If Yes, what assistance/adaptations do you require?

Rehabilitation of Offenders Act 1974

Have you any convictions that are not spent under Rehabilitation of Offenders Act?

Yes

No

If Yes, please provide further details:

7. REFERENCES (one of which should be your present or most recent employer)

Referee 1

Referee 2

Title (Mr, Mrs etc):		Title (Mr, Mrs etc):	
Full Name:		Full Name:	
Job Title:		Job Title:	
Organisation:		Organisation:	
Address:		Address:	
Tel No:		Tel No:	
E-mail address:		E-mail address:	
Fax No:		Fax No:	
Please state if we may obtain this reference prior to interview.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please state if we may obtain this reference prior to interview.	<input type="checkbox"/> Yes <input type="checkbox"/> No

8. DECLARATION

I declare that the information given in this application form is true and complete. I understand that if I have given any misleading information on this form or made any omissions, this will be sufficient grounds to disqualify me from employment or for terminating my employment with immediate effect.

Signature:			
Name:		Date:	

The information provided by you on this form as an applicant will be stored either on paper records or a computer system in accordance with the Data Protection Act 1998 and will be processed solely in connection with recruitment.

GUIDANCE NOTES FOR APPLICANTS

The Application Form

- The application form plays an important part in the selection process; decisions to shortlist candidates for interview are based solely upon the information you supply on your form and the form provides a basis for the interview itself.
- **Curriculum Vitae's (CVs) alone will not be accepted. However, CVs will be accepted *in addition to a fully completed application form.***
- You may complete the form on a word-processor but please use the appropriate headings and format.

Personal Details

- Please give your surname and initials. You are not, however, required to provide your preferred title and/or your forenames. If you have a title or other name you would like to be called (should you be called for an interview), you may at your discretion enter those details.

Education and Professional Qualifications

- List membership of professional institutes, in-house courses and professional qualifications and memberships if applicable. Essential qualifications may be checked on appointment to a post.

Present Post

- Please provide brief information in respect of responsibilities including reporting and management duties. This section should not be left blank unless the position you are applying for is your first job.
- Should you be selected for the role "your reason for leaving or wishing to leave" may be verified if we take up references.

Previous Employment

- Do not simply list the duties of your jobs. Please give a brief explanation of the main duties of your previous jobs.
- Whilst you are not required to provide dates in relation to previous jobs it is important you confirm whether or not you have had material gaps in your employment. If you have, it would be helpful if you could provide relevant details.

Relevant Skills, Abilities, Knowledge and Experience

- This section is the most important section of the Application Form and what will form the basis of our initial selection sift.
- Think about what evidence you can provide to demonstrate you have the necessary skills, ability, knowledge and experience required.
- You may have acquired these in a variety of ways e.g. through sports, voluntary work, running a home, hobbies etc.
- Address each of the criteria separately and briefly outline how you meet each one, providing specific examples.
- Please continue on a separate continuation sheet, if necessary.

Other information

- A simple list will suffice unless positions held and the skills/experience attained are directly relevant to the position for which you are applying.

References

- Should you be selected for the role we will want to take up references. However, if permissible, we may like to do this earlier in the process.
- *Employment references* – please provide referee/s details to cover recent relevant employment.
- We reserve the right to take up references from any previous employer.

Declaration

- This section must be signed by the applicant. It is a declaration of the validity of the information in the application, and confirms that misleading information would be sufficient grounds for terminating an offer of employment or actual employment if already employed.

Please return your Application Form to:

**Sharon Stone
Visit Lincolnshire
Beech House, Waterside South, Lincoln LN5 7JH**

Deadline for Receipt of Applications:

12 noon – Friday 29 January 2010

Disability Discrimination Act 1995

1. We are committed to offering fair and equal opportunities to applicants with disabilities during the recruitment process and would endeavour to provide additional help and support where needed.
2. If you believe that you are disabled under the definitions given within the Act please tick the appropriate box on the application form. This will help ensure that you are given all the help and support possible throughout the selection process and, if successful, your employment with us.

Defining a disabled person

A person has a disability if they have 'a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day to day activities'. People who have had disabilities in the past are included.

What impairment covers

It covers physical and mental impairment (excluding mental illness and behaviour problems) including learning disabilities and hearing and sight impairments.

Substantial adverse effect – something which has more than a minor or a trivial effect and is beyond the normal differences in ability which exist among people.

A long term effect of an impairment is one which has lasted or is likely to last for at least twelve months or for the rest of the life of the person. It excludes the loss of mobility due, for example, to a broken leg which is likely to heal within twelve months.

Substantial effects of a disability which have ceased but are expected to recur at least once a year e.g. rheumatoid arthritis or epilepsy are included in the definition.

Normal day-to-day activities are those carried out by most people on a fairly regular and frequent basis. It does not include activities which are normal only for a particular person or group of people such as playing musical equipment or a sport to a professional standard or performing a skilled or specialist task at work.

An 'impairment' has a 'substantial adverse effect' if it affects:

- mobility
- manual dexterity
- physical co-ordination
- continence
- ability to lift, carry or otherwise move everyday objects
- speech, hearing or eyesight (excluding people who wear spectacles)
- memory or ability to concentrate, learn or understand; or
- perception of risk