JOB APPLICATION FORM

Please return this application form to, admin.safetyfirst@btconnect.com

PERSONAL DETAILS:			
Post Applied for:			
Full Name: Mrs/Miss/Ms/Mr			
Address & Postcode:			
National Insurance No:			
Telephone: Home		**Telephone: Mobile**	
E-mail address:			
Date of Birth:			

General Information:	
If appointed, when will you be able to start?	

CURRENT OR LAST EMPLOYER:	
Name and Full Address of employer:	
Position Held:	
Full Time or Part Time:	
Basic Salary (per hour):	
Date Commenced (dd/mm/yy):	
Leaving Date (if applicable) (dd/mm/yy)	
If left, reason for leaving:	
If still employed, length of notice:	
Summary of Main Duties and Responsibilities (expand box or add additional sheet, if required):	

Previous Employment/Experience (most recent first):

Name and Address of Employer:	Date from (dd/mm/yy)	Date to (dd/mm/yy)	Summary of Role:	Reason for leaving:

Gaps in Employment:

Please detail any periods when not in employment, education or training:

EDUCATION:

Qualifications gained up to the age of 16 (Secondary School):

Name & address of school.	Study Dates	Qualifications	Grade	Date Obtained

FURTHER EDUCATION:

Name of school/college	Dates from (dd/mm/yy)	Dated to (dd/mm/yy)	Qualifications Obtained (Course Title & Level.)	Grade/Result

Supporting Statement:

Please give any further details in support of your application which demonstrate how your qualifications and experience match the Person Specification or which you feel may be of interest or relevance: (No more than 500 words)

Please e-mail you completed application form to admin.safetyfirst@btconnect.com

REFERENCES:

The receipt of satisfactory references is a condition of employment and it is the recruiter's view as to whether the references are deemed satisfactory. Please supply details of two people whom we can approach for a reference. Please note that:

- **One referee must be your current or most recent employer.**
- **References from close relatives or people writing solely in the capacity of a friend will not be accepted.**
- **We may take up with you any issues that arise from the reference(s).**

REFEREE 1		
Full Name:		**Company Name:**
Title:	**Mrs/Miss/Ms/Mr/other**	
Position Held:		
Contact e-mail:		**Address:**
Contact Number:		
May we contact them prior to interview?		

REFEREE 2		
Full Name:		**Company Name:**
Title:	**Mrs/Miss/Ms/Mr/other**	
Position Held:		
Contact e-mail:		**Address:**
Contact Number:		
May we contact them prior to interview?		

Safety First Community Training Centre will treat all personal information with the utmost confidentiality and in line with current data protection legislation.

Declaration Statement:

- I declare that the information given above and in any supporting documents is true and that nothing has been omitted that would affect this application.
- I am not named on List 99, disqualified from working with children or vulnerable adults or subject to sections imposed by a regulatory body eg GTC and either have no convictions cautions or bind-overs or I have attached details of my record on Safety First Community Training Centre's Self-Disclosure Form.
- I understand that any false or misleading information given in this application may render my contract of employment, if I am appointed, liable to summary termination.
- I agree that should I be successful in my application, the information provided and further information which will be gathered at the relevant time, will be subsequently used for the administration of my employment.

Signed: **Date:**