

## Enable Support Services Job Application Form

Title of post applied for:		Date available to start	
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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):	
Town:	Post Code:	Fax No:	
E-Mail address:		Nat. Insurance No:	
Nationality:		If you are not a British passport holder or a European Citizen, or you do not have the permanent right to remain in the UK, you will require a work permit.	
Do you need a work permit to be employed in the UK?	Yes No	If you already have a work permit, when does it expire? (Please note that your current work permit may not be valid for this post.)	
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	Examinations taken	Result

### 3. PREVIOUS EMPLOYMENT

A full work history is required  
(Please use continuation sheet if necessary.)

Name and Address of Employers	Position(s) held and dates to/from	Reason for leaving	Final grade/salary
Description of duties:			
Description of duties:			
Description of duties:			
Description of duties:			
Have you had any material (e.g. <<1 year>>) gaps in your employment? . If yes, please provide relevant details:			

**4. RELEVANT SKILLS, ABILITIES, KNOWLEDGE, EXPERIENCE AND YOUR REASONS FOR APPLYING FOR THIS JOB**

## 5. AVAILABILITY

The grid below represents a normal working week.

Indicate with a ' X ' in each of the hour boxes, and the overnight boxes when you **would normally be available** for work.

Please note: normal availability is the hours you are available for work on a regular basis

	Morning						Afternoon					Evening					Overnight
	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	
Monday																	
Tuesday																	
Weds																	
Thursday																	
Friday																	
Saturday																	
Sunday																	

Do you hold a current driving licence?	Yes	No	Do you own a car?	Yes	No
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### Disability Discrimination Act 1995

Do you consider yourself to be disabled under the Disability Discrimination Act?	Yes	No
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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
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If Yes, please provide further details:

If selected for interview, do you require any assistance/adaptations to help you attend?	Yes	No
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If Yes, what assistance/adaptations do you require?

## 6. REFERENCES

Referee 1 (Must be current/previous line manager)		Referee 2	
Title (Mr, Mrs etc):		Title (Mr, Mrs etc):	
Full Name:		Full Name:	
Job Title:		Job Title:	
Organisation:		Organisation:	
Address:		Address:	
Town:	Post Code:	Town:	Post Code:
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.	Yes No	Please state if we may obtain this reference prior to interview.	Yes No

## 7. 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 for terminating my employment.

Signature:		Date:	
Name:			
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.			