The Bassetlaw Action Centre welcomes applicants from all irrespective of gender, marital status, disability, race, age or sexual orientation.

1. All sections to be completed in black (handwritten or typed for copying purposes)
2. Additional sheets may be attached wherever necessary
3. Please ensure you clearly state which post(s) you are applying for

**BASSETLAW ACTION CENTRE**

**CONFIDENTIAL**

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| **APPLICATION FOR THE POST OF** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL DETAILS –** c**omplete in block capitals** | | | | | | | | | | | | | | | |
| Surname | | |  | | | | | Title by which you wish to be referred | | | | Mr  Mrs  Miss  Other: | | | |
| First Name(s) | | |  | | | | | | | | | | | | |
| Date of Birth | | |  | | | | | National Insurance No. | | | |  | | | |
| Full Address | | |  | | | | | | | | | | | | |
| Home Telephone | | |  | | | | | Business Telephone  (if we may contact you there) | | | |  | | | |
| Mobile | | |  | | | | | Email Address | | | |  | | | |
| **EDUCATION/TRAINING/QUALIFICATIONS** | | | | | | | | | | | | | | | |
| From | To | School/College/University/Other | | | | Full/Part-Time/ Correspondence etc. | | | | Qualifications | | | | Grade | Date |
|  |  |  | | | |  | | | |  | | | |  |  |
| **RELEVANT NON QUALIFICATION COURSES ATTENDED** | | | | | | | | | | | | | | | |
| Organising Body | | | | | | Course Details | | | | | | | | From | To |
|  | | | | | |  | | | | | | | |  |  |
| **MEMBERSHIP OF PROFESSIONAL BODY** | | | | | | | | | | **GRADE OF MEMBERSHIP** | | | | | **DATE** |
|  | | | | | | | | | |  | | | | |  |
| **PRESENT EMPLOYER OR MOST RECENT EMPLOYER**  **(if currently unemployed state “UNEMPLOYED”)** | | | | | | | | | | | | | | | |
| Name and Address:  Postcode: | | | | | | | | | | | | | | | |
| Job Title | | | |  | | Grade/Salary | | | | |  | | | | |
| Date of Appointment | | | |  | | Responsible to | | | | |  | | | | |
| Date of Leaving  (if applicable) | | | |  | | Notice Required  (if applicable) | | | | |  | | | | |
| Reason for seeking other employment | | | |  | | | | | | | | | | | |
| Brief description of duties:    (continue on separate sheet if necessary) | | | | | | | | | | | | | | | |
| **PREVIOUS EMPLOYMENT**  (Starting with most recent – continue on separate sheet if necessary) | | | | | | | | | | | | | | | |
| Employer | | Job Title | | | Grade/Salary | From | | | To | | | | Reason for leaving | | |
|  | |  | | |  |  | | |  | | | |  | | |
| **OTHER TYPES OF WORK/VOLUNTARY EXPERIENCE** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **INFORMATION IN SUPPORT OF YOUR APPLICATION**  **(Continue on a separate sheet if necessary)** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **OUTSIDE HOBBIES/INTERESTS** | | | | | | | | | | | | | | | |
| Please give brief details: | | | | | | | | | | | | | | | |
| **HEALTH/MEDICAL NEEDS** | | | | | | | | | | | | | | | |
| Do you smoke? Yes  No  Do you require any adjustments to be made to enable you to attend interview or take up any position offered? Yes  No | | | | | | | | | | | | | | | |
| **REFEREES (One of which should be your present or most recent employer)**  **If shortlisted references will automatically be taken up unless otherwise indicated** | | | | | | | | | | | | | | | |
| Name: | | | | | | | Name: | | | | | | | | |
| Position held by referee: | | | | | | | Position held by referee: | | | | | | | | |
| Name and Address of organisation: | | | | | | | Name and Address of organisation: | | | | | | | | |
| Telephone Number: | | | | | | | Telephone No: | | | | | | | | |
| Email Address: | | | | | | | Email Address: | | | | | | | | |
| May references be taken up without further approval: Yes  No | | | | | | | | | | | | | | | |
| **MISCELLANEOUS** | | | | | | | | | | | | | | | |
| Do you hold a current driving licence? Yes  No | | | | | | | | | | | | | | | |
| Do you have regular use of a vehicle? Yes  No | | | | | | | | | | | | | | | |
| Where did you see the advertisement for this vacancy? | | | | | | | | | | | | | | | |

Signature:       Date:

**PLEASE NOTE:** To ensure a prompt consideration, please ensure this form is returned to: **Bassetlaw Action Centre, Canal Street, Retford, Nottinghamshire, DN22 6EZ.** The successful applicant will be required to complete an enhanced DBS check.

**DATA PROTECTION ACT:** Information on this form may be held on computer. Strict confidentiality will be observed and disclosures will only be made for payroll and personnel administration purposes.