

Wheatley Group is committed to Equality and Diversity

Wheatley Group Application Form





No job applicant or employee is treated more or less favourably on the grounds of age, disability, gender reassignment, marital or civil partner status, pregnancy or maternity, race, colour, nationality, ethnic or national origin, religion or belief, sex or sexual orientation or HIV status.

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Please use black ink and BLOCK LETTERS or typescript.

Each section of the form to be answered in full - reference to attached CV or other enclosures will not be sufficient.

A VACANCY DETAILS									
Reference Number: Advertisement Source:									
ost Title:									
Location /Department:									
B PERSONAL DETAILS									
Surname: Initial(s) National Insurance No:									
Address and Postcode:					Do you hold a full current driving licence: Yes No				
					Telepho	one (Home):			
					E Mail A	ddress:			
					Telepho	ne (Business):			
					E Mail A	ddress:			
C AVAILABILITY F			hand that into			alian and the same the			
Please state any dates that you	ı woula be u	nable to at	tena the inte	rview	ana sele	ection process in the next two month	ıs.		
D SCHOOL EDUCATI	0 N								
List all certificates at their high	est level only	. Continue	on a separato	e shee	et if nece	essary.			
Subject			Level / Resu	ılt		Subject	Le	vel / Result	
1					6				
2					7				
3					8				
4					9				
5					10				
E FURTHER, VOCAT	IONALAI	ND HIGH	ER EDUC	ATI	0 N				
List all Colleges, Polytechnics or educated applicants please spe					mination	ns taken and results awarded or awa	iting). N	lon-UK	
6 II	Dat	tes	Study Meth		hod	Qualifications Obtained, Grade(s	ns Obtained. Grade(s) and		
College/University	From	То	F/T		P/T	Major Subjects Studies		Awarded/ Awaited	



















F MEMBERSHIP OF PROFESSIONAL INSTITUTES								
Name of Institute	Current Status	Date Awarded						
G PRESENT EMPLOYMENT								
Do we have you permission to contact your current employer prior t		Yes No						
Name and Address of Employer:	Date Employment Commenced: Present Salary and Benefits:							
	Tresent Sulary and Benefits.							
Position Held:	Notice Required:							
Duties and Responsibilities:	nonce requires.							
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H PREVIOUS EMPLOYMENT (list in order, with most recent employer first)						
Continue on	separate she	et if necessary				
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I EXPERIENCE, SKILLS AND TRAINING					
lease describe your interest in this role and the experience and skills that you are able to bring to it.					
Continue on the next sheet if necessary)					

Name, Address and Occupation of two employed. <i>One of these referees should</i> * Please tick the box if you have any obj	be your curren	t or mos	recent e	employer.		viously	
Name and Address of Referee - 1:	Name and Address of Referee 2:						
Email		Email					
Occupation:	Occupation:					*	
K DISABILITY							
Wheatley Group is a Disability Confident em on your application form that you meet the interview stage of the recruitment process.							
I consider myself to have a disability as interview.	defined above	and wa	nt to app	ly for a guarante	ed	Yes	No
Do you need any reasonable adjustmer interpreter for the deaf, wheelchair acc		nents to	oe made	at interviews? (e	.g.	Yes	No
If yes, please specify:							
L CANVASSING						-	
Canvassing directly or indirectly in connection wit will be liable for dismissal.	th the appointmen	t shall disq	ualify your	application. If discov	ered after (appointme	ent you
M ENTITLEMENT TO WORK IN THE	E U K						
If you are successful in obtaining emplo appropriate documentary evidence of y	yment with th			o, you will be requ	uired to p	rovide	
N HEALTH DECLARATION							
Any offer of employment will be made conditions from the Occupational Health Service in relation t			questionn	aire and on a satisfac	tory report	being rec	eived
O REHABILITATION OF OFFENDE	RS ACT 1974						
The Rehabilitation of Offenders Act 1974 en 'rehabilitation period'. Excepted posts are th applies. You may be entitled to withhold infethe event of employment, any failure to disc for interview you will be required to complete of employment is being made.	nose to which the ormation about o close could resul	e Rehabili convictior t in dismi	ation of 0 s which a ssal or dis	Offenders Act 1974 Ire 'spent' under the ciplinary action by	(Exceptio e provision your empl	ns) Orde n of the c loyer. If:	act. In selected
P DECLARATION (Read carefully)							
The information you provide in this form wil assessing your suitability for appointment; t establishments, to confirm the accuracy of	his may include	contactin					ng
If your application is unsuccessful we will di which comply with the General Data Protect you provide to fulfil our legal requirement to This information will be used for statistical p	tion Regulations o monitor equal o	and the D	ata Prote	ction Act 2018. We	will use t	he inforn	nation
By typing and signing my name below, I cer of my knowledge. I realise that false inform						rrect to t	he best
Signature:		Date	:				
If returning the application by e-mo		ent@wh	atley-gr				

REFEREES