**APPLICATION FOR EMPLOYMENT**

**CONFIDENTIAL**

**All information provided is treated in confidence.**

**Certain information will be held and processed on computer in accordance with the Lilias Graham Trust’s registration under the Data Protection Act.**

**The Lilias Graham Trust wishes to ensure that comparison between applicants for posts is thorough, fair and in line with its Equal Opportunities policy. It is, therefore, essential that you complete this application form fully.**

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The information on this page is for Lgt Administration department use.

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| --- |
| **Post applied for** |
|  |
| **Location** |
|  |
| **How did you hear about this vacancy?** |
|  |
|  |
| **SURNAME** |
|  |
| **FIRST NAME** |
|  |
| **HOME ADDRESS** |
|  |
| **TEL(HOME)** |
|  |
| **TEL(MOBILE)** |
|  |
| **TEL(WORK)** |
|  |
| **EMAIL ADDRESS** |
|  |
| **May we contact you at work YES/NO** |
|  |
| **If offered a position, how much notice, if applicable, are you required to give?** |
|  |
| **Are there any dates/times you cannot attend for interview?**(Please note: we may not be able to accommodate your constraints) |
|  |

**WORK EXPERIENCE**

We want to know about your work experience, paid or unpaid. Please give details of all the posts you have held, starting with your *current post*, accounting for any gaps in employment.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates Employed** | **Name of****Employer/****Organisation** | **Type of****Business** | **Job Title & Summary****of Main Responsibilities** | **Please state:****casual, p/t, f/t,****voluntary** | **Reason for leaving** | **Final****Salary** |
|  |  |  |  |  |  |  |

**EDUCATION AND TRAINING**

Please list all the qualifications you have and any education and/or training (including short courses) that you have undertaken.

|  |  |  |
| --- | --- | --- |
| **DATES** | **EDUCATION** | **QUALIFICATIONS** |
|  |  |  |
| PROFESSIONAL MEMBERSHIPS (include grade of membership): |
|  |
| OTHER TRAINING COURSES/QUALIFICATIONS RELEVANT TO THIS APPLICATION: |
|  |

**PERSONAL STATEMENT**

|  |
| --- |
| *Please use this section to give additional information to support your application and include your reasons for applying for this post. You should outline experience, skills, knowledge and abilities which you feel to be particularly relevant to the job.* |
|  |

|  |
| --- |
| All successful applicants will undertake a PVG check before commencing post.It is essential that all applicants have a full UK Drivers licence; |

***FOR CAR-USER POST***

|  |
| --- |
| Do you hold a current driving license YES/NO |
|  |
| Do you have access to a car for work YES/NO |
|  |

**REFERENCES**

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| --- |
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|  |
| **Referee 1** |
| Name |
|  |
| Position |
|  |
| Organisation |
|  |
| Address |
|  |
| Tel no |
|  |
| Mobile |
|  |
| Email |
|  |
| May we contact this referee prior to appointment? YES/NO |
|  |
| **Referee 2** |
| Name |
|  |
| Position |
|  |
| Organisation |
|  |
| Address |
|  |
| Tel no  |
|  |
| Mobile  |
|  |
| Email  |
|  |
| May we contact this referee prior to appointment? YES/NO |
|  |
| If your previous employer no longer exists, or if there have been breaks in your employment over the last 3 years, please give the name of a responsible person to act as a personal referee.This person must not be related to you and must have known you for at least 3 years. |
|  |
| I declare that, to the best of my knowledge, the information given on this form and on any other documents supporting this application is true and correct.I understand that if I am appointed to the Lilias Graham Trust’s staff it will be on the basis of this information and that a false statement may result in termination of that employment. |
| Signature: |
|  |
| Date: |
|  |

**Please return this form to** **clairethomson@thelgt.org.uk**