

College/University

Study dates



Job application form			
Vacancy title: Please tell us how you heard	I about this vacancy:		
1. Personal details			
Last name:		First name:	
Address:			
Postcode:			
Home Telephone No.		Daytime Contact No.	
E-mail address:			
<u>Driving Licence</u> Do you hold a full, clean driving licence valid in the UK? No No			
2. Education/Qualifications			
Education	Study dates	Qualification and Grade	Date obtained

Qualification

and Grade

Date obtained

Ongoing Professional Development	Study dates	Qualification and Grade	Date obtained	
Training and Development				
Please use the space below t post and supports your appli		ning or non-qualification based development whic	ch is relevant to the	
Training Co	ourse	Course Details (including length of course/nature of training)		
Current Membership of any	Professional Body/Orga	nisation		
Please give details:				
3. Employment history				
Previous employment: Please include any previous experience (paid or unpaid), starting with the most recent first.				
Current or most recent employer				
Name of employer:				
Address:				
		Postcode:		
Position held:				

Date started:		Leaving date:		
Reason for leaving:				
Salary on leaving this post:	Conta	act name of line manager ence:	for	
g and pass				
Brief description of duties:				
Previous employer				
Name of employer:				
Address:				
		Postco	de:	
Position held:				
Date started:		Leaving date:		
Reason for leaving:				
Salary on	Co	ontact name of line mana	ger for	
leaving this post:		ference		
Duint description of duties.				
Brief description of duties:				

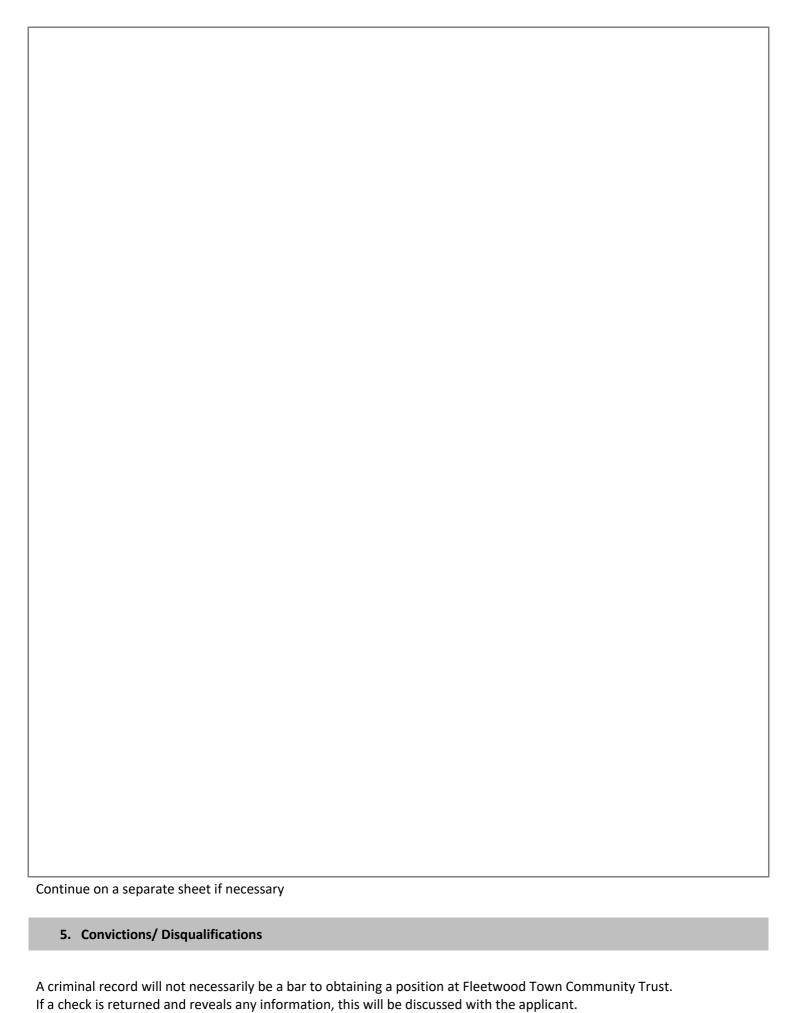
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Name of employer:					
Address:					
			Postcoo	de:	
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Position held:					
Date started:			Leaving date:		
Reason for leavin	g				
Salary on			Contact name of line man	ager for	
leaving this post:			reference		
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Brief description	of duties:				

Continue on separate sheet if necessary

4. Information in support of your application

Skills, abilities and experience

Please use this section to demonstrate why you think you would be suitable for the post by reference to the job description and person specification (and by giving examples and case studies). Please include all relevant information, whether obtained through formal employment or voluntary/leisure activities. Attach and label any additional sheets used. See guidance sheet for further information.



Rehabilitation of Offenders Act 1974 (Exceptions)(Amendment) Order 1986
We would draw your attention to the following statement:-
"Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act, 1974, by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 and the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986. Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act".
Please provide details below if you have been convicted of a criminal offence or been the subject of a conditional discharge or probation order. (Past criminal proceedings are not necessarily an obstacle to taking up a post. This occurs only where the offence/s is/are deemed relevant. Any details will be discussed with you should you be the successful candidate based on your supporting statement, interview and tests).
6. Reasonable arrangements for interview
Please contact us if you need the application form in an alternative format including large print.
Assume which the converse ditions relating to your anadown out in this country?
Are you subject to any conditions relating to your employment in this country? YES/NO If "yes" please use the space below to tell us what these are?
If you need us to make any adaptations for your interview to accommodate any disability you may have please tell us what these should be?

References				
Please give	the detai	l of two references – You should provide both a character and employment referee.		
Name of re				
and relation	onship to			
,04.				
Address:				
		Postcode:		
	Email:	Tel:		
Name of re				
and relation you:	onship to			
•				
Address:				
		Postcode:		
	Email:	Tel:		
Declaration	on			
Statement	to be sign	ned by the applicant		
Dloaco com	nloto tho	following declaration and sign it in the appropriate place below. If this declaration is not completed		
	-	lication will not be considered.		
_	I agree that Fleetwood Town Community Trust can create and maintain computer and paper records of my personal			
data and t	hat this w	ill be processed and stored in accordance with the Data Protection Act 1998.		
I confirm t	I confirm that all the information given by me on this form is correct and accurate and I understand that if any of the			
information I have provided is later found to be false or misleading, any offer of employment may be withdrawn or				
employme	iii termin	aleu.		
Signed:		Date:		