

# Job Application Form

Post Applied  
for:

Available Start  
Date:

Please can you tell us how did you hear  
of this position:

It is important that you read the job description before completing this application form. Please complete this form fully using black ink or type. Applications received after the closing date will not normally be considered.

**THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE**

## Section 1: Personal details

Surname:

First Name:

Title:

Address:

  
  

Postcode:

Home Telephone N<sup>o</sup>:

National Insurance  
N<sup>o</sup>:

Letters Numbers Letter

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Daytime Telephone N<sup>o</sup>:

Date of Birth:

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Mobile Telephone N<sup>o</sup>:

E-mail address:

Are you free to remain and take up employment in the UK with no current immigration restrictions?

Yes

No

Driving Licence – Do you hold a full, clean driving licence valid in the UK?

Yes

No

I agree that Y Services for young people can create and maintain computer and paper records of my personal data for the purpose of this application and that this will be processed and stored in accordance with the Data Protection Act 1998.

Yes

No

If you are successful you will be required to provide relevant evidence of the above details prior to your appointment.

## Section 2: Present Employment

**Present Employment** (If now unemployed give details of last employer)

**Name of Employer:**

**Address:**

  
  

**Postcode:**

**Post Title:**

**Date of Appointment:**

**Brief description of duties:**

Continue on a separate sheet if necessary

Period of Notice:  Last day of service  
(if no longer employed):

Reason for leaving:

## Section 3: Previous Employment

Previous Employment (most recent employer first).

Name of Employer:

Address:

Postcode

Position Held:

Summary of duties:

Start Date:  Finish Date:

Reason for leaving:

Name of Employer:

Address:

Postcode

Position Held:

Summary of duties:

Start Date:

Finish Date:

Reason for leaving:

Name of Employer:

Address:

Postcode

Position Held:

Summary of duties:

Start Date:

Finish Date:

Reason for leaving:

**Name of Employer:**

**Address:**

**Postcode**

**Position Held:**

**Summary of duties:**

**Start Date:**

**Finish Date:**

**Reason for leaving:**

Continue on a separate sheet if necessary

## Section 4: Education

Qualifications obtained from Schools, Colleges and Universities. Please list highest qualification first:

College or University	Course	Qualifications/grade obtained and dates
School	Subjects	Qualifications/grade obtained and dates
Professional/Technical/ Management Qualifications	Course details and date	

Membership of any Professional / Technical Associations - Please state level of Membership

Continue on a separate sheet if necessary

## Section 5: Training and Development

Please give details of any training and development courses or non-qualifications courses which support your application. Include any on the job training as well as formal courses.

Title of Training Programme or Course	Duration of course and date

Continue on a separate sheet if necessary

## Section 6: IT Skills

Give brief description of packages used. Please indicate whether knowledge is basic, intermediate or advanced.

Software package / Program	Level of Knowledge

Continue on a separate sheet if necessary

## Section 7: Personal Statement

### **Abilities, skills, knowledge and experience.**

Please use this section to explain in detail how you meet the requirements of the Job Description and Person Spec. If you are or have been involved in voluntary/unpaid activities, please also include this information.

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Continue on a separate sheet if necessary

## Section 8: Protecting Children and Vulnerable Adults

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. This means that you are not entitled to withhold information about convictions which for other purposes are 'spent' under provisions of the Act.

**Have you ever been convicted or cautioned with respect to a criminal offence?**                      **Yes**                      **No**

**If yes, please give details / dates of offence(s) and sentence:**

**If my application is successful, prior to taking up the post, I consent to Y Services for young people requesting an Enhanced Disclosure through the Disclosure and Barring Service.**                      **Yes**                      **No**

## Section 9: Disability Discrimination Act

This Act protects people with disabilities from unlawful discrimination. The Disability Discrimination Act defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long term effect on his or her ability to carry out normal day to day activities.

**Do you have a disability which is relevant to your application?**                      **Yes**                      **No**

**If yes, please give details:**

**We will try to provide access, equipment or other practical support to ensure that people with disabilities can compete on equal terms with non-disabled people.**

**Do we need to make any specific arrangements in order for you to attend the interview? If yes please give details:**                      **Yes**                      **No**

## Section 10: Health

Successful applicants may be required to complete a detailed medical questionnaire.

Number of days sickness absence in the last 2 years:

Please state number of occasions in the last 2 years:

Are there any medical issues we need to be aware of:

## Section 11: References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your references are.

Reference 1		Reference 2	
Name:	<input type="text"/>	Name:	<input type="text"/>
Position (job title):	<input type="text"/>	Position (job title):	<input type="text"/>
Work Relationship:	<input type="text"/>	Work Relationship:	<input type="text"/>
Organisation:	<input type="text"/>	Organisation:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	Postcode <input type="text"/>		Postcode <input type="text"/>
Telephone N <sup>o</sup> :	<input type="text"/>	Telephone N <sup>o</sup> :	<input type="text"/>
E-mail:	<input type="text"/>	E-mail:	<input type="text"/>

Are you willing for these referees to be approached if you accept an interview?

Yes

No

## Section 12: Declaration

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

***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 could result in my dismissal.***

***I agree that Y Services for young people can create and maintain computer and paper records of my personal data and that this will be processed and stored in accordance with the Data Protection Act 1998.***

Signed:

Date:

If you return this form by email, you will be asked to sign your application at interview

### RETURNING THIS FORM

**By Hand or Post to:**  
Y Services for young people  
42 Wallis Road  
Waterlooville  
Hants  
PO7 7RX

**By E-Mail:**  
info@yservices.co.uk