

**Application Form**

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| First name:  | Surname:  |
| Position you are applying for:  |
| Address: Post code  |
| Email:  |
| Home Phone no:  | Mobile no:  |
| Are you related to or know anyone who is currently employed by Disability Support? If yes please give name and relationship: Yes [ ]  No [ ]   |
| Do you have a full clean driving licence?: Yes [ ]  No [ ]   |

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| Details of education and results: |

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| Details of training and other qualifications :  |

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| Details of hobbies/pastimes :  |

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| How does the role you are applying for with Disability Support fit in to your career/future? |

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| Explain why you feel you are suitable for this role (**please make specific reference to the job description & person specification**)Please continue on a separate sheet if required. |

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| Is there anything else you would like to add in support of your application? |

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| Previous Employers - List below your last 3 employers, starting with the current or most recent |
| Name of employer and type of business: |
| Position | Salary | Dates of employment |
| Duties | Reason for leaving |

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| Position | Salary | Dates of employment |
| Duties | Reason for leaving |

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| What else have you been involved in? (for example community work/volunteering) |

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| Please explain any gaps in employment: |

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| Please give two contacts for references – One must be a previous employerReferees will only be contacted after a job offer. |
| Name: Company: Address:  |
| Tel: Email:  | Relationship:  |
| Name: Company: Address:  |
| Tel: Email:  | Relationship:  |

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| Have you ever been convicted of a criminal offence which is not a spent conviction within the terms of the Rehabilitation of Offenders Act 1974? If yes, please give full details: |

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| My signature confirms that all the information given on this application form is true and complete. I understand that any falsification or deliberate omissions may disqualify my application or lead to my dismissal. I confirm that I am entitled to work in the UK & Ireland and can provide original documentation to confirm this. I understand that my employment is subject to references that are satisfactory to Disability Support.Sign: Date:  |

Thank you. All successful applicants will be informed within 4 days of the closing date