



## EMPLOYMENT APPLICATION

This form may not allow sufficient space for provision of the information requested, or other information you feel would be relevant to the application. If this is the case, please include additional sheets.

### PERSONAL DETAILS:

<b>Post applied for:</b>	
<b>Surname:</b>	<b>First Name(s):</b>
<b>Address:</b>	
	<b>Postcode:</b>
<b>Telephone No: Daytime:</b>	<b>Evening:</b>
<b>E-mail address:</b>	
<b>Are you legally eligible for employment in the UK?</b>	<b>Yes / No</b> (delete as applicable)
<b>Do you require a work permit to work in the UK?</b>	<b>Yes / No</b> (delete as applicable)
<i>Please note that prior to making an offer of employment, we are required by law to verify documentary evidence (and maintain copies for our files) regarding a candidate's eligibility to work in the UK. This applies to all applicants regardless of nationality/origin.</i>	
<b>Have you any criminal convictions which are not 'spent'?</b>	
<b>Yes / No</b> (delete as applicable)	
<b>If yes please give dates and details.</b>	

*This post is exempt from the provisions of the Rehabilitation of Offenders Act 1974, which means that applicants are not entitled to withhold any information requested about previous convictions even if, in other circumstances, they would be regarded as 'spent' under the Act.*

**CURRENT (OR MOST RECENT) EMPLOYMENT OR WORK EXPERIENCE**

Title of Post	
Number of Hours worked per week:	
Name and Address of Employer	
	Postcode
	Date of Appointment
Salary and Hourly Rate (Full time equivalent)	Period of Notice / Contract End Date
Summary of Duties Responsibilities	
Reason for Leaving:	

**PREVIOUS EMPLOYMENT** (most recent first - you may include unpaid work)

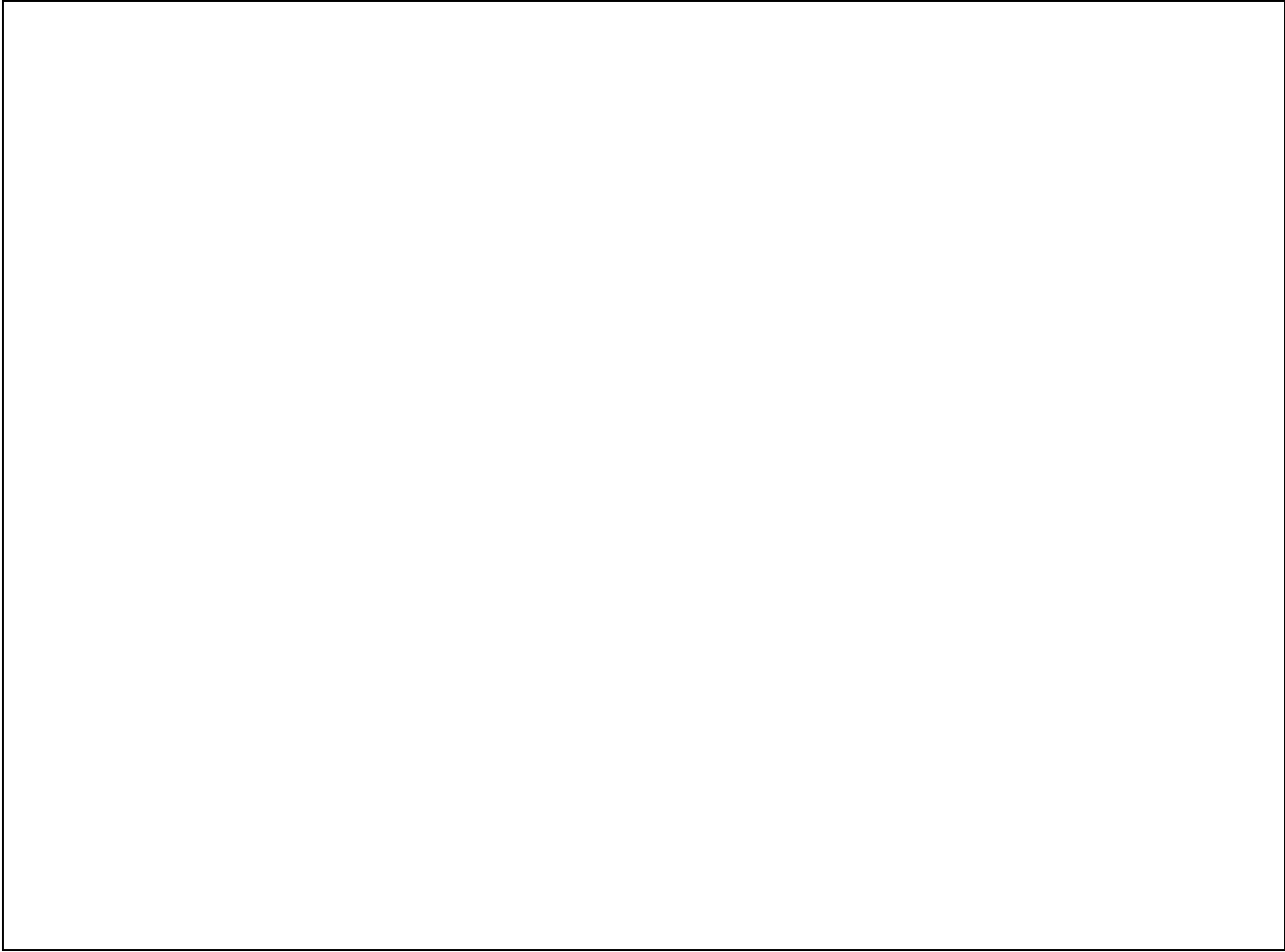
Please give a brief explanation of any periods of unemployment

Employer's Name and Address	Title of Post Held	Salary and Scale (FTE)	Date From	Date To	Reason for leaving

**EDUCATION AND QUALIFICATIONS** (most recent first). Include details of any qualifications for which you are currently studying/expect to attain.

Schools, Colleges Universities or other Training organisations	Attained Date	Programme of study/examinations taken (with levels and grades)

**OTHER INFORMATION RELEVANT TO THE POSITION INCLUDING REASONS FOR APPLYING AND EXPERIENCE AND QUALIFICATIONS. PLEASE REFER TO THE PERSON SPEC WHEN COMPLETING THIS.**



## APPLICANT'S DECLARATION

I hereby give my consent, in connection with this application, for all previous employers, educational institutions and references to be contacted to obtain and verify the accuracy of information provided by me in support of this application.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of the application or immediate termination of employment, whenever it may be discovered.

I understand that Holderness is permitted to hold personal information about me as identified on this application form as part of its recruitment procedures and personnel records.

**Note:** Holderness Health is an equal opportunities employer and does not unlawfully discriminate in employment. No information provided by the applicant will be used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by law.

**Applicant's signature:**

**Date:**