Ard Jerkyll, East Foxdale, Isle of Man. IM4, 3HL

General Enquiries: 01624 851672

Email: info@manxspca.com

ManxSPCA
EST. 1897

CONFIDENTIAL APPLICATION FORM

1 Position applied for _____ Full / Part time

Availability/notice required in present employment _____

Salary/wage sought £ _____ Work Permit required Yes / No

Please state where you saw the position advertised _____

2 Personal Details

Title _____ Surname _____ First Name(s) _____

Address _____

_____

_____ Postcode _____

Email address _____

Telephone number: Home _____ Mobile _____

3 Transport

Do you have a current/full driving licence? Yes / No

Do you own a car? Yes / No

If yes, do you have any current endorsements on your licence? Yes / No

If yes, please give details. Please use additional sheets of paper if required _____

_____

_____

4 Health

Are there any adjustments that may be required should you be invited for an interview? Yes / No

If YES, please provide full details. _____

_____

_____

5 Criminal convictions

Do you hold a criminal conviction that is **not considered spent** in accordance with the Rehabilitation of Offenders Act 2001? **YES / NO**

Are you subject to any current criminal proceedings? **YES / NO.** If yes, please give details.

6 Summary of Work Experience.

Please start with your most recent employment and list in reverse order. Please use additional sheets of paper if required

Present/last employer _____ Type of business _____

Employer's address

Starting date _____ Leaving date (if applicable) ____ Salary _____

No. of employees_____ Job title _____

Other benefits (pension/medical etc.) _____

Main duties and responsibilities. Please use additional sheets of paper if required

_____

_____

_____

Reason for leaving (if applicable) _____

Present/last employer _____ Type of business _____

Employer's address

Starting date _____ Leaving date _____ Salary on leaving _____

No. of employees_____ Job title _____

Other benefits (pension/medical etc.) _____

Main duties and responsibilities. Please use additional sheets of paper if required

_____

_____

_____

Reason for leaving _____

Present/last employer _____ Type of business _____

Employer's address

Starting date _____ Leaving date_____Salary on leaving

No. of employees _____ Job title _____

Other benefits (pension/medical etc.) _____

Main duties and responsibilities. Please use additional sheets of paper if required

_____

_____

_____

Reason for leaving _____

Present/last employer _____ Type of business _____

Employer's address

Starting date _____ Leaving date_____Salary on leaving

No. of employees _____ Job title _____

Other benefits (pension/medical etc.) _____

Main duties and responsibilities. Please use additional sheets of paper if required

_____

_____

_____

Reason for leaving _____

7 Why are you applying for this position? Please tell us why you have applied for this position and how your skills and experience are relevant to your application. Please use additional sheets of paper if required.

_____

_____

_____

_____

_____

_____

_____

_____

_____

8 Education Please use additional sheets of paper if required.

A. Secondary education				
School name/address	Date from	Date to	Subjects taken	Grades achieved

B. Further education and training					
University/college name	Date from	Date to	Type of course	Subjects	Qualification or class of degree attained

9 Training Please use additional sheets of paper if required.

Details of any professional qualifications or training courses completed	Level achieved	Date completed

10 Community/volunteer experience Please use additional sheets of paper if required.

Organisation name/address	Date from	Date to	Position/title	Duties

11 Interests/hobbies. Please let us know which pastimes, sports, etc. you enjoy.

_____

_____

_____

_____

_____

Offices held in any social/sports clubs

_____

_____

12 Referees. Please give details of two referees, one of whom should be your present or last employer.

Name: _____ Name:_____

Address: _____ Address: _____

_____ _____

_____ _____

Position held: _____ Position held: _____

Tel. _____ Tel. _____

e-mail address: _____ e-mail address: _____

I authorise the charity to obtain references to support this application once an offer has been made and accepted. I release the charity and referees from any liability caused by giving and receiving information.

Declaration: I confirm that the information given in this form is, to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection, or if employed, dismissal.

Signature: _____ Date: _____