



# APPLICATION FORM

**IMPORTANT:** Please complete this form in **BLACK** ink or **TYPE**. Please complete every section.

<b>ACCOUNTS ASSISTANT</b>
APPLICATION FOR THE POSITION OF: .....

## 1. PERSONAL DETAILS

Surname:		Forenames:	
Title (Mr/Mrs/Miss/Ms/Other):		Date of Birth:	
Address for Correspondence:		Permanent Address (if different):	
Home telephone no:		Mobile telephone no:	
Email address:			
National Insurance No:			

## 2. PRESENT OR LAST EMPLOYER

Name and address of employer:		Name and address of establishment where employed (if different):	
Nature of business:		Job Title:	
Present annual salary (gross):			
Date appointed:		Notice required or leaving date if last appointment:	
Reason for leaving or for seeking other employment:			
Brief description of duties:			

### 3. PREVIOUS EMPLOYMENT

Start with the most recent first.

Include work/voluntary experience and any periods of unemployment. Continue on separate sheet if necessary.

Employer's name & address	Job title	Dates (month/year)		Reason for leaving
		From	To	

### 4. SECONDARY EDUCATION

Dates Attended		Subjects passed	Grade	Date
From	To			

### 5. FURTHER / HIGHER EDUCATION

Establishment	Subject	Type and class of award	Dates Attended		Date of award
			From	To	

### 6. PROFESSIONAL OR VOCATIONAL QUALIFICATIONS

Organising body	Course title	Qualification or level gained	Dates Attended		Date of award
			From	To	

## 7. INFORMATION IN SUPPORT OF YOUR APPLICATION

Please give details of any relevant experience, skills or knowledge to support your application. Be concise but make sure that you cover all the essential points of the person specification.

## 8. REFEREES

Please provide details of two referees below. Friends and relatives are not acceptable referees. One of the referees must be your present/or most recent employer and normally no offer of employment will be made without reference to them. The Two Counties Trust reserves the right to approach any previous employer.

Name (Referee 1):		Name (Referee 2):	
Job title:		Job title:	
Organisation		Organisation	
Address:		Address:	
Telephone No:		Telephone No:	
Email address:		Email address:	
How long known?		How long known?	
Do you give consent to us contacting your present / most recent employer prior to interview?	YES <input type="checkbox"/> NO <input type="checkbox"/>		

## 9. DECLARATION OF CONVICTIONS, CAUTIONS , REPRIMANDS, WARNINGS OR BIND-OVERS

Jobs in schools are exempt from certain provisions of the Rehabilitation of Offenders Act 1974. You must declare, whether spent or not, any convictions, cautions or reprimands, warnings or bind-overs which are not protected under the Rehabilitation of Offenders Act 1974 and give details of the offences. The fact that you have a criminal record will not necessarily debar you for consideration for this appointment.

Do you have **ANY** convictions, cautions or reprimands, warnings or bind-overs which are not protected under the Rehabilitation of Offenders Act 1974?

Please tick the relevant box

YES  NO

If the answer is "yes", you must record full details in a self-declaration form (available from the vacancy website) marked with your name and 'Confidential: Criminal Record Declaration' and provide it with your application. In accordance with statutory requirements, an offer of employment will be subject to satisfactory DBS clearance.

## 10. DATA PROTECTION

The personal information collected on this form will be processed on computer to manage your application. If successful, your personal information will be retained whilst you are an employee and used for matters relating to your employment. It will not ordinarily be disclosed to anyone outside the Trust without first seeking your permission, unless there is a statutory reason for doing so. This Trust has a duty to protect the public funds it administers and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. Please refer to the Privacy Notice on our website for more information.

## 11. DECLARATION

I declare that, to the best of my knowledge and belief, the information given on all parts of this form is correct. I understand that, should my application be successful and it is discovered subsequently that information has been falsified, then disciplinary action may be taken which may include dismissal from the post.

I confirm that I have a legal right to work in the UK and if this application is successful, I undertake to produce appropriate documentary evidence to prove this, prior to commencing work.

Signed

Date

**Please return your completed form to [Debbie.duggan@twocountiestrust.co.uk](mailto:Debbie.duggan@twocountiestrust.co.uk) to arrive by 5pm on 17<sup>th</sup> May 2018**

**If you have not received a reply within 4 weeks of the closing date, you should assume that your application has been unsuccessful.**

## EQUALITY AND DIVERSITY MONITORING FORM

This part of the application form will not be used to shortlist candidates for interview and will not be viewed by the Recruitment Panel. The Two Counties Trust is committed to the development of positive policies to promote equal opportunities in employment and in the delivery of our services. In order to ensure that equal opportunities policy is effective, it is important to collect monitoring information. Your assistance in completing this section is greatly appreciated as it helps us to improve our policies and practices.

<b>Your gender - are you:</b>	<b>Male</b>	<b>Female</b>	<b>Transgender</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Your age:</b>	<b>16-25</b>	<b>26 - 35</b>	<b>36 - 45</b>	<b>46-55</b>	<b>56 and over</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I would describe my **ethnic origin** as:

**White:**

English

Other British

Irish

Other white background (please describe):

**Black or Black British:**

African

Caribbean

Other Black background (please describe):

**Asian or Asian British:**

Indian

Pakistani

Bangladeshi

Chinese

Other Asian background (please describe):

**Mixed (dual heritage)**

Asian and White

Black African and White

Black Caribbean and White

Other mixed background (please describe):

**Other ethnic group**

Arab

Gypsy

Irish Traveller

Romany

Other ethnic group, (please describe):

**What is your religion or belief?:**

<b>No religion / belief</b>	<b>Christian</b>	<b>Buddhist</b>	<b>Hindu</b>	<b>Jewish</b>	<b>Muslim</b>	<b>Sikh</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Other religion (please describe):**

**Other belief (please describe):**

<b>What is your sexual orientation?:</b>	<b>Heterosexual</b>	<b>Bisexual</b>	<b>Gay man</b>	<b>Lesbian</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If you consider yourself to be disabled, please specify:**

<b>Communication</b>	<input type="checkbox"/>	<b>Hearing</b>	<input type="checkbox"/>	<b>Learning</b>	<input type="checkbox"/>	<b>Mental Health</b>	<input type="checkbox"/>
<b>Mobility</b>	<input type="checkbox"/>	<b>Physical</b>	<input type="checkbox"/>	<b>Visual</b>	<input type="checkbox"/>	<b>Other</b>	

**Please give further details below if you wish:**