



SNAP

(Special Needs Advisory and Activities Project)

Confidential

Application for Employment

Post for which you are applying:

Completed forms to be returned to: **Carrie Wood, SNAAP, Windchimes, Reynolds Close, Herne Bay CT6 6DS (please mark your envelope Private & Confidential)**

Closing Date: **22nd January 2010**

Personal Details

Surname:	Home Address:
First Name:	
Date of Birth:	
Home Telephone No:	
Mobile Telephone No:	

Current or most recent employment

Job Title:	
Start Date:	Leaving date or notice required:
Current salary:	Grade (if applicable)
Employer's name and address:	
Work telephone number:	
Duties and responsibilities:	
Reason for leaving:	

Employment History

Please state the most recent after that shown under 'current or most recent employment' on page 1. Please photocopy and attach additional pages as necessary, providing the same information as outlined below.

Starting date:	Leaving Date:
Employer's name and address:	
Position held:	
Duties and responsibilities:	
Reason for leaving:	

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Employer's name and address:	
Position held:	
Duties and responsibilities:	
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Employer's name and address:	
Position held:	
Duties and responsibilities:	
Reason for leaving:	

Education

Please state qualifications gained for which you may need to provide evidence.

Schools, Colleges, Universities or Institutions of Further Education attended (including part-time)	Dates			Qualifications gained including subjects, grades or results expected
	From	To		

Any other relevant qualifications or records of achievement (e.g. courses attended) including membership and status of any relevant Professional or Technical Association.

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General experience and further information

Please use this section to tell us how you feel you meet the requirements of the **Person Specification** and the **Job Description**. Give as much information as necessary to demonstrate the skills, experience and knowledge you have gained. This could include voluntary work, leisure interests and any other activities that you consider relevant to this position.

Additional Information

Have you a full clean driving licence?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have use of a vehicle?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there any special help you may require for interviews?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is yes, what help would you like?	
<p>Rehabilitation of Offenders Act 1974</p> <p>This post is exempt from the provisions of the Rehabilitation of Offenders Act. You must give details of any convictions; both spent and unspent on a separate sheet.</p>	

References

Applicants are requested to supply below the names of two people, excluding relatives and personal friends, who can be approached for references. These will not be contacted unless you are offered the post.

Referee 1	Referee 2
Name:	Name:
Position held:	Position held:
Address:	Address:
Telephone Number:	Telephone Number:

Signature

I certify that the information I have provided is correct. I understand that giving false information may lead to disciplinary action, which may include dismissal.

Signed: _____ **Date:** _____

<u>FOR OFFICE USE ONLY</u>			
SHORT-LISTED YES/NO	INTERVIEWED YES/NO	APPOINTED YES/NO	COMMENTS
If no, reason:	If no, reason:	If no, reason:	
Initial	Initial	Initial	

