



**STRICTLY CONFIDENTIAL APPLICATION FORM**

**Job Reference**

(This field must be completed)

**Please use black ink – An application form MUST be completed/submitted for each vacancy.**

**The completed form should be returned to .....**

**Application for the post of: \***

\*this field must be completed.

**Personal Details**

First Name(s):

Surname:

Address:

How long have you lived at this address?  
Years                      Months

Home Tel. No:

Mobile Tel. No:

E-mail Address:

**Do you need a work permit?**(a) No.                     

(b) Yes, and I already have one.    Expiry Date:

(dd/mm/yyyy)

(c) Yes, but I do not have one.  

**\*\*If you have provided an e-mail address, this will be the method by which you will be contacted.**

**However if you DO NOT wish to be contacted by e-mail please tick this box.**

**Present Employment** (if now unemployed give details of last employer)

Name and Address of current employer:

Post Title:

Salary: £

Date of Appointment:

(dd/mm/yyyy)

Department/ Section:

Brief description of job:

Period of Notice:

Reason for leaving:

<b>Previous Employment</b>		Start with the most <u>recent</u> employer first.		
Dates (dd/mm/yy)		Name and Address of Employer (Nature of Business)	Position, brief description of job and salary	Reason for Leaving
From	To			

(Please continue on separate sheet if necessary)

<b>Voluntary/Unpaid Activities</b>			
Dates (dd/mm/yy)		Name and Address of Organisation	Position, brief description of role
From	To		

## Education, Qualifications & Membership of Professional Associations/Institutes

Please give details of your education and qualifications obtained. This includes any qualification which you are studying for now. First School details are not required. You will be required to prove you have obtained these qualifications. If you are a member of a professional association/institute please provide details.

	Qualifications obtained (dates, grades/ level achieved where applicable)
Name of School	
College/ University	
Professional Associations/ Institutes	

## References

**All candidates** – Please give details of two referees whom we may ask about your suitability for the post. One of these should be your most recent employer. Referees must not be related to you. If you are a school/college leaver, please give the name and address of a head teacher/tutor and also the manager of your most recent work experience placement- if applicable. (Internal candidates: please note your line managers must be one of the referees). We reserve the right to approach your current and any previous employer.

### Reference 1: (from present or most recent employer)

Name & address of organisation:

Tel. No:

E-mail:

Occupation:

Capacity in which known to you:

Dates of employment:                      to  
(dd/mm/yyyy)

If you are called for an interview, Yes   
may we contact your referee?      No

### Reference 2:

Name & address of organisation:

Tel. No:

E-mail:

Occupation:

Capacity in which known to you:

Dates of employment:                      to  
(dd/mm/yyyy)

If you are called for an interview, Yes   
may we contact your referee?      No

## **Supporting Information**

Please provide any information you consider relevant, including your reason for applying for the post and why you consider yourself to be suitable for the post. You can also draw on experience you may have gained outside the work environment.

**Remember to provide examples that demonstrate your skills, knowledge and experience.**

**Important Information**  
**Criminal Convictions**

Have you ever been convicted of any offence by any Court, or received a formal police caution?

Yes   
No

If yes, please give full details. (We will only take them into account if we consider them relevant to the post for which you have applied).

**Disability Discrimination**

All information will be treated in confidence.

Do you have a disability? Yes  No

If yes, please state the type of disability you have:

In relation to any disability, do you have any particular requirements in order to attend an interview? Yes  No

If yes, please give details:

**General**

Do you hold a current driving licence? Yes  No

Do you have the daily use of a car? Yes  No

Do you have any relatives working in this company? Yes  No

If yes, please state name(s) and relationship(s):

**Declaration**

I certify that the information provided is true and accurate and in particular that I have not omitted any facts which may have a bearing on my application. I understand that any subsequent contract of employment with the company will be made on the basis of the information I have provided. I understand that a false declaration which results in my appointment with the company's service will render me liable to dismissal without notice. I give explicit consent that the information which I give in this form may be processed in accordance with the Company's registration under the Data Protection Act 2004.

Signature:.....

Date:..... (dd/mm/yyyy)



**RECRUITMENT MONITORING FORM**

**STRICTLY CONFIDENTIAL**

Confidential Job Reference No.

**This sheet will be separated from your application form/CV upon receipt and does not form part of the selection process.**

**Application for the post of:**

Gibtelecom aims to be an equal opportunities employer, and selects staff on merit, irrespective of race, colour, nationality, ethnic or national origins, gender, marital status, family responsibility, age, disability, sexual orientation or religious belief. In order to monitor the effectiveness of our equality policy, Gibtelecom requests that all applicants complete this form. In accordance with the Data Protection Act 2004, the information you have provided will only be used for the purposes of equality monitoring. The information will be used in summary form only and may inform improvements to our equality policy.

**What is your Ethnic Group**

Choose ONE section from A to E, then tick the appropriate box to indicate your cultural background.

**A. White**

British

Irish

Other, please write in:

**B. Mixed**

White and Black Caribbean

White and Black African

Other, please write in:

**C. Asian or Asian British**

Indian

Pakistani

Bangladeshi

**D. Black or Black British**

Caribbean

African

Other, please write in:

**E. Chinese or other ethnic group**

Chinese

Other, please write in:

**F. I do not wish to provide this information.**

**Gender**

Male

Female

**Disability** – Do you have a disability? Please tick one box.

- |   |                          |   |                          |
|---|--------------------------|---|--------------------------|
| 00 – None.  | <input type="checkbox"/> | 06 – You have mental health difficulties.   | <input type="checkbox"/> |
| 01 – You have a specific learning difficulty<br>(For example dyslexia). | <input type="checkbox"/> | 07 – You have a disability that cannot be seen,<br>For example epilepsy or a heart condition. | <input type="checkbox"/> |
| 02 – You are blind or partially sighted.                                | <input type="checkbox"/> | 08 – You have two or more of the above  | <input type="checkbox"/> |
| 03 – You are deaf or hard of hearing.                                   | <input type="checkbox"/> | 09 – You have a disability, special need<br>above.  | <input type="checkbox"/> |
| 04 – You use a wheelchair or have mobility<br>difficulties.             | <input type="checkbox"/> | 10 – I do not wish to provide this information  | <input type="checkbox"/> |
| 05 – You have Autistic Spectrum Disorder or<br>Asperger Syndrome.       | <input type="checkbox"/> |   |                          |

**Present Status**

Internal Applicant

External Applicant

**Date of Birth**

(dd/mm/yyyy)

Age

**Media**

Please state where you saw this post advertised:

If other, please state: