

Job Application Form

Please complete this form fully using **black ink or type**. C.V.s are not accepted on their own. Applications received after the closing date will not normally be considered.

THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.											
Section 1	Personal details	S									
Last Name:		First Name	e: [
Address:											
											\dashv
Postcode:]									_
Home Telephone Nº:		Date of B	Birth:								
Mobile Telephone Nº:		National Insuranc	o Nº·	Letter	s N	Numbers	: 		$\overline{}$	Lett	er
mobile relephone it.		- National insuranc									_
E-mail address:											
Section 2	Education										
Qualifications obtained from	Schools and Colleges										
College	Cours	Qualifications and grades obtained									
School Subjects		ts	Qualifications and grades obtained								
						J					

Continue on a separate sheet if necessary

Section 3 Training and Development

Please give details of any training and development courses or non-qualifications courses which support your application. Include any on the job training as well as formal courses.

-	Γitle of Trai	ning Program or Course	Duration of Course				
Continue on a sep	parate shee	t if necessary					
Section 4		Employment (If A	Applicable	!)			
Present Emplo	yment (If n	ow unemployed give details	of last employe	r)			
	Г						
Name of Emplo	yer:						
Address:							
Postcode:							
Post Title:							
Date of Appoin	tment:						
Brief description	n of duties	:					
Continue o	n a separat	e sheet if necessary					
			l aat day a t aan				
Period of Notice:			Last day of ser (if no longer em				
Reason for leave (if no longer emp							

Personal Statement Abilities, skills, knowledge and experience. Please use this section to explain why you think you are suitable for the position. If you are or have been involved in voluntary/unpaid activities, please also include this information. Continue on a separate sheet if necessary **Disability Discrimination Act** Section 6 This Act protects people with disabilities from unlawful discrimination. We actively encourage applications from people with disabilities. The Disability Discrimination Act defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long term effect on his or her ability to carry out normal day to day activities. Do you have a disability which is relevant to your application? If yes, please give details: We will try to provide access, equipment or other practical support to ensure that people with disabilities can compete on equal terms with non-disabled people. Do we need to make any specific arrangements in order for you to Yes attend the interview? If yes, please give details:

Section 5

Section 7 References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your references are

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Reference 1			Reference 2					
Name:			Name:					
Position:			Position:					
Relationship:			Relationship:					
Organisation:			Organisation:					
Address:			Address:					
	Postcode			Postcode				
Telephone Nº:			Telephone Nº:					
E-mail:			E-mail:					
Are you willing for referee to be appr prior to the intervien	oached Yes	No	Are you willing for the referee to be approaprior to the interview	ached Yes	No			
Section 8	Declarat	ion						
Signed:			Date:					
	e a reply must cond		vithin three weeks of the cation has been unsucc					
Barnsley Commu	ınity Build undertal	ces that it will treat	any personal informat	tion (that is data fr	om which you can			

be identified, such as your name, address, e-mail address etc) that you provide to us, or that we obtain from you, in accordance with the requirements of the Data Protection Act 1998.

If you are returning this form by email, you will be asked to sign your application at the interview.

RETURNING THIS FORM | <u>=</u>"|

By Hand or Post:

Barnsley Community Build 189 Sheffield Road Barnsley S70 4DE

Enquiries:

Telephone: 01226 786780