

JOB APPLICATION FORM



CONFIDENTIAL

* Delete as Appropriate

POSITION APPLIED FOR _____

1) PERSONAL DETAILS:

Surname _____ *(Mr/Mrs/Miss/Ms) Forenames _____

Address _____

Telephone (Home) _____ (Business) _____ (Mobile) _____

Email _____

Do you hold a current Isle of Man / UK Valid Driving Licence? *YES/NO

Do you have access to your own transport? *YES/NO

2) RESIDENTIAL STATUS:

Are you an Isle of Man Worker as defined in the Control of Employment Act? *YES/NO

If YES under which section of the guidance notes do you qualify? _____

If living on the Isle of Man, when did you take up residence? _____

3) MEDICAL HISTORY :

Have you any disability (please state nature) *YES/NO _____

Are you a registered disabled person? *YES/NO _____

Have you had any serious illness within the last 5 years? (If YES, please indicate if you are receiving any medical treatment at present or taking any medication) *YES/NO

Please set out any absences for sickness over the past 2 years _____

Sections. 4 to 7 – If you already have a CV prepared please append to application form rather than completing sections. Please ensure that you indicate the Notice period you are currently required to give.

4) EDUCATION :

Name and Location of Secondary School (s)	Dates		Specify all Subjects and Results / Exams taken with Dates and Level
	From	To	

5) FURTHER EDUCATION:

University / Polytechnic/College	Dates		Details of Course / Exam Results with dates taken.
	From	To	

6) MEMBERSHIP OF PROFESSIONAL / TECHNICAL INSTITUTIONS:

Dates	Details: Please Give Full Title and Common Abbreviations

7) EMPLOYMENT HISTORY:

Commencing with current / most recent post – continue on a separate sheet if necessary

Dates		Employers Name, Address & Nature of Business	Position and details of responsibilities – please include reason for leaving and final salary
From	To		

How much Notice does your present employer require? _____ *months / weeks

8) REFERENCES:

Please provide the names of two persons (other than relatives or members or officers of the Southern Civic Amenity Site Board (SCASB)) from whom references may be obtained. Where possible one must be your present or last employer or someone who can comment on your work performance. Referee names should not be given without the consent of the person concerned.

Name _____ Name _____

Position Held _____ Position Held _____

Address _____ Address _____

Email _____ Email _____

May we approach either or both referees prior to interview? *YES/ NO

9) CRIMINAL OFFENCES: (please refer to the enclosed notes attached before completing this section)

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

Are you currently the subject of any criminal proceedings? *YES/NO

If the answer to either question is YES, please give particulars:

(Answering YES does not automatically bar you from employment. Each case is considered on its merits).

10) RELATIONSHIP TO MEMBERS / SENIOR OFFICIALS:

Are you related to any Member of SCASB or a Senior Member of Staff? *YES/NO

If the answer to this question is YES, please provide details.

11) DECLARATION:

I declare that to the best of my knowledge and belief, the information in this application form and my C.V. is true and accurate. I understand that if any material details I have given are found to be false, or that I have withheld relevant information, my application may be disqualified or, if already in employment, my appointment terminated. I accept the terms of this offer and agree to abide by them. I also understand that from time-to-time Southern Civic Amenity Site Board may wish to process any personal information (as periodically updated) contained within this document for personnel and administration purposes. This may include transfer of data to appropriate third parties. I understand that where this is the case, processing and transfer of data will take place in accordance with the provisions of the Data Protection Act 2002. By signing this form, I acknowledge that I will be providing Southern Civic Amenity Site Board with my consent to these uses. I hereby give permission for pre-employment screening to be carried out if I am offered an appointment or if considered appropriate.

Signature _____

Date _____