

WMB EMPLOYMENT APPLICATION FORM

PLEASE USE BLACK INK THROUGHOUT THIS APPLICATION

Name:
Full Address:
Position applied for:
Daytime Tel No:
Evening Tel No:
Mobile Number:
On which number would you prefer to be contacted?
Email Address:

National Insurance No.			
Do you need a work permit to take up this appointment?	Yes / No	Are you a UK or EU/EEA national?	Yes / No

EMPLOYMENT

Please enter your previous employment details below. Start with your current or most recent job. (Use separate sheet if necessary)

Name and Address of Employer					
Dates of Employment		Salary		Reason for Leaving	
Job Title & Responsibilities					

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EDUCATIONAL DETAILS

Please list educational establishments attended starting with the most recent.

Dates From: To:	Name & Address	Level of Qualification	Subject	Grade

TRAINING COURSES

Please list training courses attended starting with the most recent. Please just list those that you consider to be relevant to this post.

Training course details	Training provider (in house or external). If external, please specify body	Length of course	Dates attended

STATEMENT IN SUPPORT OF YOUR APPLICATION

Referring to the enclosed Person Specification, please describe below how your experience and personal qualities relate to each of the attributes listed. When addressing each of the criteria, it is important that you demonstrate your skills, abilities, knowledge and experience with examples – we cannot make assumptions and simply stating that you can fulfil the criteria will not be considered enough information. Please answer in the space below but use a continuation sheet if necessary.

PERSONAL

What do you consider your greatest achievement?

The Mission of Wise Masterbuilders Childcare Ltd are summed up in our C.A.R.E programme namely **Credibility, Accountability, Relationship Building and Exemplary Leadership**: Describe a time when you have demonstrated these values (Please use a continuation sheet if necessary)

What are your strengths and areas for development?	
Strengths:	Development Areas:

REFERENCES

Please list two referees. They will only be contacted after interview. One must be your current/most recent employer. The second must be employment related or academic if possible.	
Name:	Name:
Address:	Address:
Email:	Email:
Tel No:	Tel No:
Job Title:	Job Title:
Relationship to you:	Relationship to you:
Check with you before we make Contact? Yes/No	Check with you before we make Contact? Yes/No

If you were offered the post how soon would you be able to start?	
Do you have any unspent criminal convictions?	Yes / No - If yes, give details:

I declare to the best of my knowledge, I have given the correct information.
Signed:
Date:

**PLEASE NOTE THAT CVs WILL NOT BE ACCEPTED IN PLACE OF THIS APPLICATION FORM
EQUAL OPPORTUNITIES MONITORING**

We do not discriminate against people we employ or people seeking employment on any grounds including gender, racial grounds, sexual orientation, disability or age.

We believe that maximising human potential within the organisation must start with the experience and knowledge that each individual brings and that different ideas, beliefs and cultural traditions can bring a wealth of understanding to our Company that is beneficial to us all. We strive to ensure we follow anti-discriminatory practices and we are committed to challenging discrimination if it is encountered.

All the information asked for on this form is for organisational monitoring purposes only. Individual information will remain anonymous.

Post applied for: _____

In which office/at which site: _____

Please **BOLD** or circle the most relevant answers:

Age: Under 18 18-25 26-35
36-45 46-55 56-65
Over 65

Gender: Male Female
Transgender

Ethnic Origin: *White*

British Irish
Other, please specify _____

Asian or Asian British

Indian Pakistani Bangladeshi
Other, please specify _____

Black or Black British

Caribbean African
Other, please specify _____

Mixed

White & Black Caribbean White & Black African
White & Asian
Other, please specify _____

Chinese

Other Ethnic Group

Please specify _____

Religion or Belief: Please specify _____
Do not wish to answer

Sexual Orientation: Heterosexual Lesbian Gay

Bi-Sexual

Do not wish to answer

Disability:

The Equality Act (2010) defines a disability as a physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal day to day activities.

Do you have a disability?

Yes

No

Mental Health:

Wise Masterbuilders Childcare Ltd positively promotes diversity in the workforce. Part of the group is Self Help Services, a user led mental health charity. We encourage applications from people who have direct experience of mental health issues.

Do you have direct experience of mental health issues?

Yes

No

Language: Is English your first language?

Yes

No

if no, please specify:

Where did you see this vacancy advertised?

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FORM. THIS FORM WILL BE SEPARATED FROM YOUR APPLICATION FORM UPON RECEIPT AND WILL NOT BE SEEN BY THE SHORTLISTING PANEL