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ARK at Egwood CIC

(Changing Lives Within Our Community)

Postal: Egwood House, Egwood, Merriott, Somerset, TA16 5QN

Office: 01460 391974

## Email: office@arkategwood.com

## Application for Employment

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| **Notes for completion:**  Please complete this form and return via email to: office@arktegwood.com  Additional sheets may be attached. i.e. copy of CV.  Please complete all sections.  Deadline for return is 0900 on Monday 13th January 2025 Post Applied for: Armed Forces Link Worker |

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| **1. PERSONAL DETAILS** | |
| SURNAME: | FIRST NAMES: |
| ADDRESS: | HOME PHONE NUMBER:  WORK PHONE NUMBER:  EMAIL ADDRESS: |
| Have you a current full driving licence? | Do you own/have access to a car? |
| Where did you hear about the job? |  |

In accordance with the Data Protection Act 2018, ARK at Egwood CIC will hold and use data held on you for administration purposes only. We would stress that your personal data is available only to ARK at Egwood CIC and not for direct access by third parties.

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| **2. EDUCATION AND QUALIFICATIONS** | | | |
| SECONDARY SCHOOL/COLLEGE/UNIVERSITY ETC | DATES  FROM TO | QUALIFICATIONS | GRADE |
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| **PRESENT/PREVIOUS EMPLOYMENT AND VOLUNTARY WORK**  **(most recent first)** | | | |
| DATES  TO FROM | NAME & ADDRESS OF EMPLOYER | JOB TITLE & BRIEF OUTLINE OF RESPONSIBILITIES | REASON FOR LEAVING |
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| **5. Any Additional Information (please continue on a separate sheet if necessary)** |
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| **6. CRIMINAL CONVICTIONS** |
| Do you have a criminal record, including any pending convictions? All information given will be used only to assess the applicants’ suitability for the post and that they will be considered on merit and ability. Please enclose any disclosure letter marked private and confidential for the attention of the Chief Executive |

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| **7. WORKING IN THE UK** |
| Do you have the right to work in the UK?  (You will be required to provide proof of identity prior to commencing employment). |

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| **8. REFERENCES** | |
| NAME: | NAME: |
| ADDRESS, EMAIL & TELEPHONE NUMBER | ADDRESS, EMAIL & TELEPHONE NUMBER |
| POSITION | POSITION |
| MAY WE CONTACT THIS REFEREE PRIOR TO INTERVIEW?  YES/NO | MAY WE CONTACT THIS REFEREE PRIOR TO INTERVIEW?  YES/NO |

|  |  |
| --- | --- |
| **9. DECLARATION**  I declare that the information given on this application form is to the best of my knowledge true and complete. | |
| SIGNED | DATE |

Please return this form to: office@arkategwood.com