

Do you require a work permit to work in the UK?

| Name: |  |  |
|-------|--|--|
|       |  |  |
| Date: |  |  |

## **Job Application Form** (The following information will be treated in the strictest confidence)

Please complete this application form in your own handwriting and submit along with a covering letter and C.V. to <a href="mailto:recruitment@animates.org.uk">recruitment@animates.org.uk</a> Use this e-mail if you require further information with regards to potential vacancies.

| Address:  |   |  |  |  |
|---|---|--|--|--|
|   | <del>-</del>  |  |  |  |
| Postcode:   |   |  |  |  |
| Email:  |   |  |  |  |
| Phone: Home:  | Mobile:   |  |  |  |
| Full Driving License: N /   | Υ   |  |  |  |
| Endorsements: N /   | Y: If YES, please give further details including dates: |  |  |  |
| Position Applying for:_   | Desired Hours:  |  |  |  |
| Are you willing to work overtime and weekends if required? N / Y  |   |  |  |  |
| Please give details of any hours which you would not wish to work:  |   |  |  |  |
| Are you involved in any activity which might limit your availability to work or your working hours e.g., local government?                  |   |  |  |  |
| N / Y: If YES, please give further details:   |   |  |  |  |
| Are you subject to any restrictions or covenants which might restrict your working activities?  N / Y: If YES, please give further details: |   |  |  |  |
|   |   |  |  |  |
| Have you ever been convicted of a criminal offense? (declaration subject to the rehabilitation of offenders Act 1973)                       |   |  |  |  |
| N / Y: If YES, please o   | give further details:                                   |  |  |  |
| Have you ever worked for this business before? N / Y: If YES, please give further details:  |   |  |  |  |
|   |   |  |  |  |

N / Y

## **EDUCATION**

| Schools attended since age 11  | From   | То      | Examinations and Results |  |  |
|--|--------|---------|--------------------------|--|--|
| -  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
| College or University  | From   | То      | Courses and Results      |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
| Further Formal Training  | From   | То      | Diploma/Qualification    |  |  |
| Turtier Formal Training  | 110111 | 10      | Біріотта/ Qualificación  |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
| Job related Training Courses   | Data   | Cubicat |                          |  |  |
| Name of Organisation   | Date   | Subject |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
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|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
| Please give details of membership of any technical or professional associations:   |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |
| Please list languages spoken and the level of competence:  |        |         |                          |  |  |
| The state of the s |        |         |                          |  |  |
|  |        |         |                          |  |  |
|  |        |         |                          |  |  |

| Previous Employer Name, Address & Contact:  |                           |  |  |  |
|---|---------------------------|--|--|--|
| (No approach will be made to your present employer before an offer of employment is made to you)  |                           |  |  |  |
| Dates of Employment:  | FROM TO                   |  |  |  |
| Duties:   |                           |  |  |  |
| Reason for Leaving:   |                           |  |  |  |
| Rate of Pay:  | Contracted No. Of Hours : |  |  |  |
| INTERESTS, ACHIEVEMENTS, LEISURE ACTIVITIES (e.g. hobbies, sports, club memberships)  |                           |  |  |  |
|   |                           |  |  |  |
| SUPPLEMENTARY INFORMATION Please set out below any further information to support your application, e.g. past achievements, future aspirations, personal strengths.                     |                           |  |  |  |
| Please tell us if there are any 'reasonable adjustments' we can make to assist you in your application or with our recruitment process:   |                           |  |  |  |
| Please tell us if there are any dates you will not be available to interview  |                           |  |  |  |
| Why should we consider you for this position?   |                           |  |  |  |
| I can confirm that to the best of my knowledge the above information is correct. I accept that providing deliberately false information could result in my dismissal  Signature:  Date: |                           |  |  |  |

## **REFERENCES**

Please give the names of two people (one of which should be your present or most recent employer) whom we may approach for a reference.

| Name:                                | Name:    |
|--------------------------------------|----------|
| Position:                            |          |
| Address:                             |          |
|                                      |          |
|                                      |          |
|                                      |          |
| Tel. No:                             | Tel. No: |
| SOURCE OF APPLICATION                |          |
|                                      |          |
| How did you hear about this vacancy? |          |
|                                      |          |