



Post Applied for:

# Job Application Form

Closing Date:

Interview Date:

Please ensure you refer to the job description and person specification before completing this form. Please use **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

Last Name:  First Name:

Address:

Postcode:

Home Telephone N<sup>o</sup>:

Daytime Telephone N<sup>o</sup>:

Mobile Telephone N<sup>o</sup>:

E-mail address:

Can we contact you at work? Yes  No

Are you free to remain and take up employment in the UK with no current immigration restrictions? Yes  No

Driving Licence  
Do you hold a full, clean driving license valid in the UK? Yes  No

**If you are successful you will be required to provide relevant evidence of the above details prior to your appointment.**

## Section 2 Present Employment

**Present Employment** (If now unemployed give details of last employer)

**Name of Employer:**

**Address:**

  
  

**Postcode:**

**Post Title:**

**Date of Appointment:**

**Salary:**

**Department / Section:**

**Brief description of duties:**

Continue on a separate sheet if necessary

**Period of Notice:**

**Last day of service**

(if no longer employed):

**Reason for leaving**

## Section 3 Previous Employment

**Previous Employment** (most recent employer first). Please cover the last 10 years and state nature of business - if not public sector

Name of Employer:

Address:

Position Held:

Summary of duties:

Reason for leaving:

Name of Employer:

Address:

Position Held:

Summary of duties:

Reason for leaving:

Name of Employer:

Address:

Position Held:

Summary of duties:

Reason for leaving:

Continue on a separate sheet if necessary

## Section 4 Education

Qualifications obtained from Schools, Colleges and Universities, including any professional training or development. Please list highest qualification first:

College or University	Course	Qualifications and grades obtained
School	Subjects	Qualifications and grades obtained

Continue on a separate sheet if necessary

## Section 7 Health

Your current health is important to us, please indicate below.

Number of days sickness absence in the last 2 years:

Please state number of occasions in the last 2 years:

## Section 8 Personal Statement

**Abilities, skills, knowledge and experience.**

Please use this section to explain in detail how you meet the requirements of the Job Description. If you need to more space please use the blank page at the end of this document

## Section 9 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.

Reference 1		Reference 2	
Name:	<input type="text"/>	Name:	<input type="text"/>
Position:	<input type="text"/>	Position:	<input type="text"/>
Work Relationship:	<input type="text"/>	Work Relationship:	<input type="text"/>
Organisation:	<input type="text"/>	Organisation:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	Postcode <input type="text"/>		Postcode <input type="text"/>
Telephone N <sup>o</sup> :	<input type="text"/>	Telephone N <sup>o</sup> :	<input type="text"/>
E-mail:	<input type="text"/>	E-mail:	<input type="text"/>

Are you willing for this referee to be approached prior to the interview? Yes  No

Are you willing for this referee to be approached prior to the interview? Yes  No

## Section 13 Declaration

Signed:	<input type="text"/>	Date:	<input type="text"/>
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Thank you for your interest in this post. We will endeavor to contact all applicants within two weeks of the closing date.

**M and H Media Ltd undertakes that it will treat any personal information (that is data from 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.**

### RETURNING THIS FORM

**By Post:**

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**By Email:**

anna@museumsandheritage.com

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Telephone: 01905 724734

## Personal statement continued

(if required)