

# North East Lincs Womens Aid Job Application Form

Job Title: \_\_\_\_\_

**Full Name:** \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Email address; \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Mobile/other: \_\_\_\_\_

## Notes to applicants:

This form has been designed to give you the maximum opportunity to illustrate your suitability for the post for which you have applied. Short listing will be based on the information supplied by you so try to answer the questions as comprehensively as possible.

Please relate your experience and/or skills to the job description and person specification.

Please do not send curriculum vitae.

Please complete the form in black ink as it will need to be photocopied

## Your current / most recent employment / voluntary work

Name of Employer / Organisation \_\_\_\_\_

Address: \_\_\_\_\_

Date employed: From \_\_\_\_\_ To \_\_\_\_\_ Job Title \_\_\_\_\_

Salary \_\_\_\_\_

Reasons for leaving / wanting to leave \_\_\_\_\_

Brief Description of Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Education & Training**

Beginning with secondary education, give details of all qualifications/certificates/diplomas gained.

Date to & from	School/College/University	Subject	Grade

**Any Other Relevant Qualifications and Training. (Please give full details)**

**Previous Employment**

*Please give full details of any previous employment including gaps in employment*

<b>From</b>	<b>To</b>	<b>Name &amp; address of Employer</b>	<b>Job Title &amp; duties</b>	<b>Reason for Leaving</b>

**Additional Information**

Please use the space below, to provide any further information you feel may be relevant to support your application - including your strengths and weaknesses.

(Please use *additional sheets if needed.*)

**General Information**

Do you hold a current driving licence?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you had any driving convictions in the last 3 years?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<i>If YES, please give details.</i>				
Have you ever been refused vehicle insurance?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<i>If YES, please give details.</i>				
Do you have any disabilities that we should be aware of?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<i>If YES, please give details.</i>				

Have you ever had any recorded cautions or convictions?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<i>If YES, please give details.</i>				

**References**

Please give details of 2 referees, one of whom should be your present or last employer.

Name	Name
Occupation	Occupation
Relationship	Relationship
Address	Address
Tel.No.	Tel.No.

Are you related to any; member of the North East Lincs Womens Aid committee, staff, past resident, current resident?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<i>If YES, please give details.</i>				

If you were offered this position, when would you be able to start?

How did you **first hear** about this vacancy?  
Grimsby Telegraph / Jobs Website / Facebook / Women's Aid Email / Friend or colleague  
Other (please state) .....

**Declaration**  
I declare that the information given in this application is true. I understand that any falsification will be judged as serious misconduct and may result in dismissal. I understand that an offer of employment will be subject to the receipt of satisfactory references and police checks  
  
Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please return your signed and completed form to  
PO Box 399, Grimsby, DN32 0WZ  
before the specified deadline

All candidates will receive a letter after the short-listing process