

## JOB APPLICATION FORM

Please complete this accurately, giving as many details as possible of your skills and experience relating to this job application. Short listing will be based on the information gathered from the form, read in conjunction with the person specification. You will be advised of the outcome of your application in writing.

Please ensure the finished form is printed out, signed, dated and returned by the closing date to the address given on the last page. We are unable to accept forms returned as email attachments without a signature.

Please complete the form in black ink and BLOCK CAPITALS.

### GUIDELINES

Applicants will be treated in the same way whether they are external or internal candidates. Internal candidates should advise their manager that they have applied for another position.

### POSITION APPLIED FOR:

Job title:	<b>PERSONAL ASSISTANT</b>
Department/Region:	<b>OXFORD</b>
Reference number:	

### I. APPLICANT'S DETAILS

Title:	Surname:	First name:

<b>Home address:</b>
<b>POST CODE:</b>

<b>Telephone nos: please include full STD code</b>
Home:
Work :
Mobile (where possible):
email address (where possible):

Do you hold a current driving licence?	<b>Yes/No</b>
National Insurance Number:	

Is there anything concerning your medical history or state of health that is relevant to your application?	<b>Yes*/No</b> <i>*If you answer Yes please explain on a separate piece of paper.</i>
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Are there any restrictions regarding your employment? e.g do you require a Work Permit?	<b>Yes*/No</b> <i>*If you answer Yes please supply details on a seperate sheet of paper</i>
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How much notice do you need to give to your current employer?	
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## 2. EMPLOYMENT RECORD

Please start with your most recent employment. Briefly describe the main duties and responsibilities of your post. If you wish to expand on specific areas of responsibility, please do so in *Section 5: Experience /skills*.

1. Current/most recent employer/organisation		
Name:		
Address:		
Job Title:	From:	To:
Brief description of duties:		
Reason for leaving/changing:		

2. Employer/organisation		
Name:		
Address:		
Job Title:	From:	To:
Brief description of duties:		
Reason for leaving/changing:		

3. Employer/organisation		
Name:		
Address:		
Job Title:	From:	To:
Brief description of duties:		
Reason for leaving/changing:		

4. Employer/organisation		
Name:		
Address:		
Job Title:	From:	To:
Brief description of duties:		
Reason for leaving/changing:		

### 3. EDUCATION

Please tell us about your education and any qualifications which you feel are relevant to the post. Include relevant courses which you are currently undertaking. Please start with the most recent.

[illegible]

#### 4. TRAINING

Please list any training you have received or courses which did not lead to a qualification but which you feel are relevant to the advertised post.

[illegible]

## 5. EXPERIENCE / SKILLS

This section is for you to give specific information in support of your application. Please set the information out on a maximum of three sides of A4 paper.

After reading the Job Description and Person Specification carefully, consider to what extent you have gained the skills and experience necessary for the post. Your experience need not have been gained in paid employment and may include special interests relevant to the post. It is important that you provide evidence of your achievements by giving examples to support your application. You may wish to use the headings in the person specification in order to set the information out clearly.

## 6. REFERENCES

Please give name, address and position/occupation of two referees. One must be your present or most recent employer. References will only be taken up for the successful candidate. Testimonials or references from friends and relatives are not acceptable.

1. Name:
Position:
Organisation:
Address:
Tel:
2. Name:
Position:
Organisation:
Address:
Tel:

**7. CRIMINAL CONVICTIONS**

Do you have any criminal convictions? Yes ☐ No ☐

If Yes please give details on a separate sheet, this should exclude any spent convictions under Section 4(2) of the Rehabilitation of Offenders Act 1974.

**8. DECLARATION AND SIGNATURE**

The information supplied in this application form is accurate to the best of my knowledge.

.....  
Signed

.....  
Date

***Thank you for completing the form. Please return the form to Glad Private Care Ltd.***