

JOB APPLICATION FORM



Thank you for your interest in working for the BTO.

Please complete this application form in full, all information you supply on this form will be treated in confidence

Post Applied for:

Section 1

Personal details

Last Name:

First Name:

Address:

Postcode:

Home Telephone N^o:

National Insurance N^o:

Letters Numbers Letter

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Daytime Telephone N^o:

Mobile Telephone N^o:

E-mail address:

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

Yes

No

Are you able to provide this evidence?

Yes

No

Do you hold a full, clean driving license valid in the UK?

Yes

No

Have you previously applied for a position at BTO

Yes

No

Were you interviewed?

Yes

No

Please note that you will be required to produce documentary evidence of your right to remain and work in the UK if you are the successful candidate.

Please state where you saw this post advertised

(please provide the job board or social medial platform where you

saw this post advertised, even if you applied via BTO website)

Section 2 Present Employment (if unemployed give details of last employer)

Name of Employer:

Address:

Postcode:

Post Title:

Date of Appointment:

Salary:

Department / Section:

Brief description of duties:

Period of Notice:

Last day of service
(if no longer employed):

Reason for leaving
(if no longer employed):

Section 3**Previous Employment** (most recent employer first and at least 3 years employment history)**Name of Employer:****Address:**

<input type="text"/>
<input type="text"/>
<input type="text"/>

Postcode**Position Held:****Summary of duties:****Reason for leaving:****Name of Employer:****Address:**

<input type="text"/>
<input type="text"/>
<input type="text"/>

Postcode**Position Held:****Summary of duties:****Reason for leaving:****Name of Employer:****Address:**

<input type="text"/>
<input type="text"/>
<input type="text"/>

Postcode**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:

Please continue on a separate sheet if necessary

Section 4**Education**

Qualifications obtained from Schools, Colleges and Universities. Please list highest qualification first:

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

Section 5**Training and Development**

Please give details of any training and development courses or non-qualifications courses which support your application. Include any on the job training as well as formal courses.

Title of Training Program or Course	Duration of Course

Section 6**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 are or have been involved in voluntary/unpaid activities, please also include this information.
- We are also very interested in why you want to work for the BTO and what you can bring to the role.
- Attach and label any additional sheets used up to a maximum 2 A4 sides.

Continue on a separate sheet if necessary

Section 7 Protecting Children

The following information may be required if the post you are applying for has a requirement for a DBS police check. This will be detailed on the job description if applicable to the role you are applying for, **if it is not applicable please move to section 8.**

Enhanced Checks Only

Are you aware of any police enquires undertaken following allegations made against you, which may have a bearing on your suitability for this post? **Yes** **No**

Section 8 Equality Act

This Act protects people with disabilities from unlawful discrimination; it defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long term effect on his or her ability to carry out normal day to day activities. **If this is not applicable please move to section 9.**

If you have a disability, do we need to make any reasonable adjustments in order for you to attend the interview? **Yes** **No**

If yes, please give details or you can contact us by telephone to discuss:

Section 9 References

Please give the names and addresses of your two most recent employers (if applicable). If employed/studying at least one reference should be from the current employer/educational establishment and should be someone at a more senior level to you. 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/ other Relationship:	<input type="text"/>	Work/ other Relationship:	<input type="text"/>				
Organisation:	<input type="text"/>	Organisation:	<input type="text"/>				
Address:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <table border="1"><tr><td>Postcode</td><td><input type="text"/></td></tr></table>	Postcode	<input type="text"/>	Address:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <table border="1"><tr><td>Postcode</td><td><input type="text"/></td></tr></table>	Postcode	<input type="text"/>
Postcode	<input type="text"/>						
Postcode	<input type="text"/>						
Telephone N^o:	<input type="text"/>	Telephone N^o:	<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 10 Declaration

The information on this form will be used for recruitment and selection purposes only and if your application is successful it will form part of your employment record. All unsuccessful applications will be destroyed six months after the closing date for positions advertised in Scotland, England and Wales and three years after the closing date for positions advertised in Northern Ireland.

If it is discovered that you have given any information, which you know to be false, or withhold any relevant information your application may be rejected or any subsequent employment terminated.

I confirm that the information contained in this application form is correct.

Signed:

Date:

You can complete this form electronically and return by email without signing, if you are successful you will be asked to sign a copy of this form.

PLEASE RETURN THIS FORM WITH A COPY OF YOUR CV AND A COMPLETED MONITORING FORM

By E-Mail:

jobs@bto.org

Enquiries:

Telephone: 01842 750050