

**Strictly Confidential**

**APPLICATION FOR EMPLOYMENT**

*A CV may be attached but should not be used as a substitute*

Position applied for:
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**1 Personal Details (Please complete in BLOCK LETTERS)**

Surname:	Forename(s): Preferred name:
Preferred title for reply e.g.: Mr/Mrs/Miss/Ms/etc.	
Contact Address:	
Post Code:	
Tel. No. (Home):	Tel. No. (Work):
Tel. No. (Mobile):	Email address:
Are you “entitled for work “ in terms of the Control of Housing and Work (Jersey) Law 2012? <b>YES / NO</b>	
You will be required to provide a copy of your Registration Card	

**2(a) Educational / Professional Qualifications**

**Secondary Education**

Qualification	Grade	Year taken	Qualification	Grade	Year taken

**Further Education**

Course, e.g.: GNVQ/NVQ/ Special Training/Languages Diploma/Degree or equivalent	Dates - From/To	Course Title	Standard attained

## 2(b) Membership of Professional Bodies


## 3(b) Personal statement

*Please outline how you meet the responsibilities and person specification outlined in the job description using examples and why you are interested in the role. (Continue on a separate sheet if necessary).*

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## 4 Driving Licence

Do you hold a current, clean, driving licence? **YES / NO**

## 5 Employment History

*Starting with your present post, list in reverse order every employment you have had. Please describe your last three jobs in detail so that we can compare your experience with the requirements of the job for which you are applying.*

<b>(a) Present or most recent employment</b>		
From - Month/Year	To - Month/Year	Title of Post:
Name and address of employer:		
Number of employees supervised by you:		
Nature of business:		Period of notice:
Precise reasons for leaving or wishing to leave:		
Description of your duties:		

<b>(b) Previous employment</b>		
From - Month/Year	To Month/Year	Title of Post:
Name and address of employer:		
Number of employees supervised by you:		
Nature of business:		
Precise reasons for leaving:		
Description of your duties:		

<b>(c) Previous employment</b>		
From - Month/Year	To - Month/Year	Title of Post:
Name and address of employer:		
Number of employees supervised by you:		
Nature of business:		
Precise reasons for leaving:		
Description of your duties:		

<b>(d) Previous employment</b> <i>(If there is not sufficient space on the form, please continue on a separate sheet).</i>
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From - To	Name and address of employer	Title of Post

## 6 (a) References

*By signing this application form you authorise Dementia Jersey to approach your previous employer for a reference before offering you employment. However, **we will not** approach your present employer prior to interview. Referees should not be related to you.*

Reference 1 Present Employer	Reference 2 Previous Employer
Name	Name
Address	Address
Tel. No:	Tel. No:
Email address:	Email address:

## 7 Special Requirements

Do you have any special requirements if selected for interview? (e.g. disabled access)

## Declaration

I hereby declare that the details shown are correct and complete to the best of my knowledge.

I understand that any false statements, or the withholding of any relevant information may provide grounds for rejection of my application, or termination of my contract of employment. I understand that Dementia Jersey will process this application subject to the Data Protection (Jersey) Law.

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Please return your form

By post: Dementia Jersey, Osprey House, Old Street, St Helier, JE2 3RG

or

By email: Wendy Buckley, Operations Manager on [wendy@dementia.je](mailto:wendy@dementia.je)