

APPLICATION FOR EMPLOYMENT

This application form has been designed to tell us all we need to know about you at this stage.

The Company will process the personal data collected in connection with your application for employment in accordance with the privacy notice accompanying this form. Please complete the form in black ink and block capitals and return it to hr@integratedmedicalservices.co.uk

Post applied for:

Personal Information

Surname:	
Forenames:	
Title (Mr, Mrs, Miss, etc):	
Previous names (if any):	
Current address:	
Daytime telephone number:	
Do you have the right to take up employment in the UK? If no, please provide further details.	YES / NO
If you do not have the right to take up employment in the UK, would you wish us to assist you in applying for the right to work?	YES / NO

Education and qualifications

From GCSE or equivalent to degree level in chronological order

Establishment	Qualifications gained

Postgraduate education or study or any other professional qualifications

Establishment	Qualifications gained

Work experience

Please give details of your last three jobs. Any relevant posts held before then may also be mentioned. Please begin with your present or most recent position and then work chronologically backwards.

From	To	Name and address of employer	Job title, description of duties and responsibilities, reason for leaving and salary on leaving

Other Information

Do you have any other training, qualifications, skills or personal qualities relevant to the post (e.g. knowledge of a foreign language, computer literacy, full driving licence, etc.)?

Please give details of, and provide an explanation for, any time when you were not either working or in full-time education.

Have you made a previous application to the Company? If so, when was this and what was the outcome?

Please give details of your main extra-curricular activities and interests.

Please use this space to say why you are interested in the post for which you have applied, why you believe you are the best person for the job and provide any other information that may assist your application.

If you are disabled, please give details of any special arrangements or adjustments you would require to attend interview.

Referees

Please give details of two referees, one of whom must be your current or most recent employer or, if this is an application for your first job, your school teacher or higher or further education lecturer. Neither referee should be a relative or contemporary.

First referee	Second referee

Rehabilitation of Offenders Act 1974

In order to protect the public, the post you have applied for is exempt from certain provisions of the Rehabilitation of Offenders Act 1974. You are therefore required to disclose all and any past or pending cautions or convictions, whether spent or otherwise, unless it is either a "protected caution" or a "protected conviction" under the terms of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. All information provided will be kept in the strictest confidence and only used for the purpose of assessing your suitability for the post you have applied for.

Please specify below details of all and any past or pending cautions or convictions, whether spent or otherwise, except for protected cautions or convictions. If you have no past or pending cautions or convictions, please specify "None".

Declaration

I declare that the information I have given on this application form is, to the best of my knowledge and belief, true and complete. I understand that if it is subsequently discovered any statement is false or misleading, or that I have withheld relevant information, my application may be disqualified or, if I have already been appointed, I may be dismissed.

Signed:

Date: