



VACANCY APPLICATION FORM

Post applied for:

Closing Date:

Interview Date:

Please complete in black ink or type.

Application forms received after the closing date will not be considered.

The information you provide on this application form and that obtained from other relevant sources will be used to process your application for employment and, if appointed will form the basis of your personnel administration and payroll record with Science Projects Ltd. The company will treat any personal information in accordance with the principles of the Data Protection Act 2018.

How did you learn of this vacancy?

Section 1 Personal Details

Name:

Address:

Postcode:

Contact telephone number:

Email address:

National Insurance No:

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

YES NO

Driving licence (if relevant to post applied for)

Do you hold a full, clean driving licence valid in the UK? **YES NO**

If successful you will be required to provide relevant evidence of all above details prior to your appointment.

Section 2 Employment History

Please list current and previous employers (most recent first) and explain any breaks in employment.

Present Employment (if now unemployed give details of last employer)

Name of Employer:

Address:

Postcode:

Post Title:

Start date:

Brief description of duties and responsibilities:

Period of Notice:

Last day of service (if no longer employed):

Reason for leaving (if no longer employed):

Previous Employment (most recent employer first)

Name of Employer:

Address:

Postcode:

Position held:

Start date:

End date of employment:

Summary of duties and responsibilities:

Reason for leaving:

.....
Name of Employer:

Address:

Postcode:

Position held:

Start date:

End date of employment:

Summary of duties and responsibilities:

Reason for leaving:

Continue on a separate sheet if necessary

Section 3 Education

Qualifications obtained from Schools, Colleges and Universities, listing highest qualifications first:

Name of College or University:

Start date:

End date:

Course:

Qualifications and grades obtained:

Name of School:

Start date:

End date:

Subjects with qualifications and grades obtained:

Continue on a separate sheet if necessary

Professional, Technical or Management Qualifications

Please give details:

Continue on a separate sheet if necessary

Section 4 Training and Development

Please give details of any training and development courses or on the job training which support your application.

Continue on a separate sheet if necessary

Section 5 Personal Statement

Please use this section to explain in your own words how you meet the requirements of the person specification and what particular qualities / experience you would bring to the post if successful. You may like to include information of interests and activities you are involved in which you believe will support your application.

Continue on a separate sheet if necessary

Section 6 Rehabilitation of Offenders Act 1974

Do you have any convictions that are unspent under the Rehabilitation of Offenders Act 1974?

YES NO

If yes, please give details / dates of offence(s) and sentence:

Section 7 Equality Act

In general, The Equality Act 2010 considers a person to be disabled if they have 'a physical or mental impairment which has a substantial and adverse long-term effect on their ability to carry out normal day to day activities'. Do you consider yourself to have any disability which is relevant to your application?

YES NO

If yes, please give details:

We will try to provide access, equipment or other practical support to ensure that everyone can compete on equal terms. Should we make any specific arrangements in order for you to attend an interview?

YES NO

If yes, please give details:

Section 8 Protecting Children and Vulnerable Adults

All personnel are required to obtain an Enhanced DBS Certificate. This will require the completion of a separate DBS application form, providing documentary evidence of your identity and registering as a STEM Ambassador. This process will be discussed further at interview if appropriate.

Do you hold a current Enhanced DBS?

YES NO

Are you aware of any police enquiries undertaken following allegations against you, which may have bearing on your suitability for this position?

YES NO

Declaration to be signed by the applicant

If this declaration is not completed and signed, your application will not be considered.

If you are returning this form by email, your name typed above will suffice and you will be asked to sign your application at interview (if selected).

When checked, if information is found to be misleading or untrue this will invalidate your application and, if appointed, may lead to dismissal.

I hereby declare that:

- **All of the information I have given on this application form (and any accompanying documentation) is correct to the best of my knowledge**
- **All questions relating to me have been accurately and fully answered**
- **I possess all of the qualifications which I claim to hold**
- **I give permission for enquiries to be made to confirm the information I have provided and for the release by other people / organisations of the necessary information to verify the content.**
- **I have read and understood the job description**
- **I understand that this application form will be held in confidence by Science Projects Ltd.**

Signed:

Date:

Section 9 Referees

Please provide details for two referees, not relatives, one of whom should be your present employer (or last employer if not currently employed). Referees will not be approached unless you are offered the position.

PROFESSIONAL

PERSONAL

Name:

Position (job title):

Start date:

End date of employment:

Organisation:

Address:

Postcode:

Telephone No:

Email:

.....
PROFESSIONAL

PERSONAL

Name:

Position (job title):

Start date:

End date of employment:

Organisation:

Address:

Postcode:

Telephone No:

Email: