

September 2009

# STAFF APPLICATION FORM

Application for the position of: .....

Department: .....

Closing date for application: .....

When completed please return this form to:

Human Resources, Advanced New Technologies Limited, 47 Stockholm Road, Hull, HU7 0XW

Tel: (01482) 371000, Fax: (01482) 371001, Email: info@a-n-t.net

## **IMPORTANT NOTE – (Please read)**

You must complete all parts of the form. We do not accept C.V.s either on their own, or accompanied by a partly completed application form, and they will not be forwarded to any short-listing panel.

If you are completing this application electronically, you will be asked to sign the form if you are invited to an interview.

If you would like confirmation of the safe receipt of this application form, please enclose a stamped, self-addressed envelope.

If you do not hear from the Company within 6 weeks of the closing date, your application has been unsuccessful.

Sponsorship may be required in order to employ a person who is not a national of a country which is a member of the European Economic Area (EEA). In certain circumstances, it may not be necessary to obtain Sponsorship for a non EEA national where permanent UK resident status has been granted by the Home Office or where the passport has been endorsed with a visa which places not restriction on employment in the UK. Otherwise, the Company is required to obtain Sponsorship before the employment can begin, even if the candidate already holds Sponsorship for employment elsewhere in the UK. If you are unsure whether you require Sponsorship, please contact <http://www.bia.homeoffice.gov.uk>.

In accordance with the Immigration, Asylum and Nationality Act 2006 do you require Sponsorship in order for the Company to employ you?

YES/NO

Signature: ..... Date: .....

Successful applicants will be required to produce documentary evidence of their right to work in the UK

## **SECTION A – Personal Details**

Would you like to be addressed as: Dr/Mr/Mrs/Miss/Ms (delete as appropriate)

Surname: ..... Forenames: .....

Address: .....

.....

..... Postcode: .....

Contact Telephone Numbers: Home: .....

Work: ..... E-Mail: .....

## Section B – Employment Record

Present or most recent employment: ..... .....	
Name & Address of Employer: ..... ..... ..... .....	Job: ..... Length of Service: ..... From: ..... To: ..... Salary/Wages: .....

**Summary of the duties and responsibilities of the above job:**

Previous Employment:			
Name & Address of Employer:	Dates of Service:	Job Title & Major Elements of Job:	Reason for Leaving:

You may use a separate sheet if you need more space. Please tick here if you enclose a separate sheet for Section B. Please ensure that your surname and initials are on each sheet.

## Section C – Education & Training

If successfully appointed, you will be required to provide original certificates.

<b>Secondary Education:</b>			
<u>Certificates Gained</u>	<u>Subjects/Modules</u>	<u>Grades/Bands</u>	<u>Dates</u>

### Further and Higher Education:

<u>Course (show full-time or part-time)</u>	<u>Where Attended</u>	<u>Qualifications Gained (including grades)</u>	<u>Dates</u>

### Other Training – relevant to this application:

<u>Name of Course</u>	<u>Name of Provider</u>	<u>Qualification gained</u>	<u>Dates</u>

### Professional Qualification(s):

<u>Name of Professional Body</u>	<u>Class of Membership (with membership number)</u>	<u>Date Qualification Gained</u>

Again, you may use a separate sheet if you need more space. Please tick here if you enclose a separate sheet for Section C. Please ensure that your surname and initials are on each sheet.

## Section D – Supplementary Information

Explain what attracted you to the type(s) of work for which you are applying, and offer evidence of suitability.

**Health/Medical Information** (*NB: Any offer to take up the post will be subject to medical clearance*)

Please give an indication of how many working days you have been absent from work owing to sickness or injury in the last three years? Please indicate reasons if you consider it appropriate.

Again, you may use a separate sheet if you need more space. Please tick here if you enclose a separate sheet for Section D. Please ensure that your surname and initials are on each sheet.

## Section E – Supplementary Information

### References

*Any offer of appointment will be subject to satisfactory references.*

Please give the names, addresses and status of two referees, one of whom should be your current/most recent employer.

Please indicate whether references may be sought before interview:

Yes	No
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#### Referee 1

#### Referee 2

Name: .....

Name: .....

Status: .....

Status: .....

Address: .....

Address: .....

.....

.....

.....

.....

Postcode: .....

Postcode: .....

Telephone No: .....

Telephone No: .....

Relationship with Referee: .....

Relationship with Referee: .....

Do you possess a current full driving licence valid in the UK? .....

Do you have any driving convictions? If yes please state .....

Period of notice required: .....

Please name the publication in which you saw this post advertised: .....

Are you related to a member of staff of the Company?

Yes	No
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Relationship: .....

### DECLARATION

Under the Data Protection Act 1998, we must ask for your consent to process this form.

Please sign below if you agree.

Signature: .....

(Please note that if consent is not given, we will destroy this form).

Any serious wilful misrepresentation of information in connection with this application, failure to disclose a relationship with a member of Staff of the Company will result in dismissal.

I verify that to the best of my knowledge, the information supplied by me on this application form, and on any additional sheets submitted, is correct.

Signature: ..... Date: .....

September 2009

**Additional Information Sheet**

## Equal Opportunities Monitoring

Advanced New Technologies Limited is committed to providing equality of opportunity in its employment procedures, and towards this end, seeks to ensure that no job applicant or employee receives less favourable treatment on the grounds of sex, marital status, ethnic origin, disability, age, nationality, sexual orientation, religion, colour or race.

**In order for the Company to monitor the effectiveness of its equal opportunities policy, you are requested to complete the survey form below.**

**This sheet will be separated from your application form and information given on this sheet will not be used at any stage of the selection process to assist in producing a shortlist for interview.**

1. **Position applied for:** .....

**Department:** .....

2. **Name of Applicant:**

**Surname:** ..... **Forename (s):** .....

3. **I would describe my ethnic origin as: (please tick)**

<b>Asian or Asian British</b>	Bangladeshi	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Any other Asian Background	<input type="checkbox"/>
<b>Black or Black British</b>	African	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	Any other Black Background	<input type="checkbox"/>		
<b>Mixed</b>	White and Asian	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>	Any other Mixed Background	<input type="checkbox"/>
<b>White</b>	British	<input type="checkbox"/>	Irish	<input type="checkbox"/>	Any other White Background	<input type="checkbox"/>		
<b>Chinese</b>		<input type="checkbox"/>			<b>Any other</b>	<input type="checkbox"/>		

4. **I am:** Male  Female

5. **I am:** Single  Married  Divorced  Widowed

6. **My age is:** ..... **Date of Birth:** .....

7. **I do/do not\* have a disability:** \* Delete as appropriate

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**Signature:** ..... **Date:** .....