

	Jol	o Applicat	ion Form			
Job title:		•				
1.		Personal I	nformation	1		
To make sure ou short listing.	r process is fail	r this informat	ion is taken (off your application before		
First Name:			Surname:			
Preferred	☐ He / His	☐ She	e / Her	☐ Them / They		
pronouns:	Other:	Other:				
Address and postcode:						
Contact details:						
Mobile:						
Home:		Wor	k:			
E-mail Address:						
2.	Asylu	m and Imm	igration A	ct 1996		
Are there any rule	es about you h	aving a job in	the UK?			
Please explain :						

3. Rehabilitation	of Offenders	Act 1974 (ex	ception) Order 1975
Do you have a criminal of	conviction that	is not spent?	
	□Yes	□No	
If yes, please give details	and dates here o	or on a separate	sheet marked confidential.
4. Referen	ces – Please	give us details	s of 2 referees
A referee is someone who job.	knows you well	and can tell us	if you are suitable for this
Referee 1 should be your	current or most		
Referee 1 Employer		Referee 2 Name:	
Name:			
Business Address:		Address:	
Address.			
Job Title:		Job Title:	
		D. L. C L. C.	
Relationship to you:		Relationship to you:	
		Phone	
Phone Number:		Number:	
Email		Email	

Address:

Address:

Can we contact these referees before interview?	
Referee 1 □Yes □No	
Referee 2	
□Yes □No	
5. Please sign a	and date your form
I promise that the information I have given and correct.	in Part 1 and 2 of this application is true
I accept that if any of the information I put could lose my job straight away.	on this application is found to be untrue I
Please sign to accept and to tell us that we follow the Data Protection Act 2018.	can use the information as long as we
Sign	
Data	
Date	

	Part 2 - Application
Job title:	
1.	Education, Qualifications and Training
List all of your q college and univ professional boo	ualifcations including exams you passed at secondary school, versity. Also any relevant training courses attended or membership to dies.

2.			D	o yo	u have a job now?
	□Yes		□No	(If no	o please go to question 3)
Job title	:				
Date sta	arted:				
Tell us a	about				
your respons	ibilities				
What is	VOUR CUR	ant ani	nual salary	2	
VVIIat is	your curr	Crit arii	ildai Salai y		
			u have to		
give if yo	ou want t	o leave	your job?		
Your Cı	urrent En	nploye	er		
Employe	er's Name	ə:			
	er's Addre	ess			
and Pos	stcode:				
Contact	details:				
Phone					
Email					

3.		Please list all the jobs y	ou have had
Date Started	Date Finished	Name & Address of Employer	List Job Title, Duties and Reason You Left

Knowledge, Experience, Skills and Abilities

First, tell us about your skills and experiences in relation to all the essential criteria in the person specification for the job you are applying for.
Second, tell us about your skills and experiences in relation to all the desirable criteria in the person specification for the job you are applying for.
Please use additional sheets as necessary.

5. More about you
ell us about any hobbies, interests or work experience that are relevant to the post.

Thank you for your interest in Learning Disability Wales.

Please post your completed application to:

Recruitment
Human Resources & Governance Manager
Learning Disability Wales
41 Lambourne Crescent
Cardiff Business Park
Llanishen
Cardiff
CF14 5GG