

APPLICATION FOR EMPLOYMENT

CONFIDENTIAL

In keeping with our Equal Opportunities Policy, applicants, irrespective of age, race, sex or disability will be considered on their merits and assess as individuals in relation to this post. You must complete all of the sections, including the equal opportunities and disability information.

Position applied for:	Where you saw the advert for this post:
Personal details Title: Mr/Mrs/Miss/Ms/Other	Surname:
First names:	Previous Name:
Telephone (Day):	Address: (If less than 3 years give previous address on separate Post code:
Telephone (Eve):	
Mobile:	
Fax Number:	
E-mail:	

Relevant education and qualifications (It will be necessary to verify the qualifications given. Please attach copies of any certificates obtained) Please give the following details:	
School/College/University Name & Address	Qualifications gained, including subject, grade
Please use additional sheet if required	

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Memberships		
Give details of relevant membership of professional bodies		
Name of professional body	Date of membership	Status

Current or most recent employment	
Employer Name:	Position held:
Address:	Dates of employment:
	Minimum notice period:
Contact Name & Job Title:	Current or last salary: £ <i>(please indicate if this is a pro-rata part-time salary)</i>
Reason for leaving:	
Give a brief description of your duties in your current or most recent post	

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Relevant work history			
Give details of your previous work history for the past ten years, (including voluntary or unpaid work) beginning with the most recent post			
Dates (from/to)	Name and address of employer & contact name	Position held	Summary of main duties and reason for leaving
Have you previously been employed by the Foresters Friendly Society			YES / NO
Are you related to a member of staff?			YES / NO
If yes, please provide details on a separate sheet.			

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Other relevant information

Please give your reasons for applying, explain how your experience, skills and training are relevant to the post in question. Please provide any additional information which you feel is relevant to your application.

Please use additional sheets if required

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General Information	
Work Preference:	
Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>
Job Share <input type="checkbox"/>	
Do you hold a current full driving licence?	YES / NO
Do you have a disability or health problem which is relevant to your job application? <i>A disability or health problem does not preclude full consideration for the job and applications from people with disabilities are welcome.</i>	YES / NO
Do you agree to being health screened or to obtain a certificate of fitness from your G.P. or Occupational Health Service if required?	YES / NO
Do you need permission to work in the UK? <i>If yes, please answer the following questions</i>	YES / NO
Do you require a work permit?	YES / NO
Expiry Date of work permit? _____ <i>Please attach a copy</i>	Permit Number _____
Passport Nationality: _____	Passport Number _____
Are you visiting the UK on a working holiday?	YES / NO
Do you hold a student visa? <i>Please attach a copy</i>	YES / NO

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<p>References</p> <p>Give three referees (not relatives) from whom references may be sought. The first should be your present or last employer.</p>	
<p>Name:</p> <p>Position:</p> <p>Telephone number:</p> <p>Fax number:</p> <p>E-mail:</p>	<p>Company Name:</p> <p>Address:</p> <p>Post code: *</p>
<p>Name:</p> <p>Position:</p> <p>Telephone number:</p> <p>Fax number:</p> <p>E-mail:</p>	<p>Company Name:</p> <p>Address:</p> <p>Post code: *</p>
<p>Name:</p> <p>Position:</p> <p>Telephone number:</p> <p>Fax number:</p> <p>E-mail:</p>	<p>Company Name:</p> <p>Address:</p> <p>Post code: *</p>
<p><i>* Please indicate if not to be contacted prior to interview</i></p>	
<p>DISCLOSURE OF CRIMINAL CONVICTIONS</p> <p>The provisions relating to the non-disclosure of criminal convictions do not apply to certain occupations and activities.</p> <p>If the position for which you are applying is one that is exempt under the Rehabilitation of Offenders Act 1974, it will be necessary for you to disclose any criminal convictions even if, under the above Act, they would otherwise be regarded as "spent". Any information disclosed will be taken into consideration, but will not automatically prevent your application from proceeding. However, if you are appointed, failure to disclose any criminal conviction could lead to termination of your employment.</p>	

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Declaration

I declare that the information contained in this application is correct to the best of my knowledge, complete and accurate in all respects. I understand that knowingly giving false information will disqualify me from service with the Foresters Friendly Society. I also agree to keep the Foresters Friendly Society advised of any changes to any of the information supplied.

In connection with this application I have been advised that a search will be carried out with Experian to check all or any of the details which have been submitted. I hereby expressly consent to Experian carrying out and retaining a record of any such search or check which may be shared with other organisations for the purposes of assessing future job applications and services.

I also expressly consent to the results of any such search or check being passed to The Society for the purposes of assessing this application.

I hereby authorise the Foresters Friendly Society to obtain confidential information on my credit history and criminal records from Experian as necessary.

Signature _____

Date _____

In accordance with the Data Protection Act 1998, the information you provide on this form and in the accompanying papers will be used to assess your suitability for the post and will not be released to anyone who does not require it for this purpose. If you are engaged this information will form the basis of your personal file, otherwise it will be destroyed six months after the post is filled.

Return to : Human Resources Department
Foresters Friendly Society
29-33 Shirley Road
Southampton
Hampshire SO15 3EW

Tel: 023 80 229655

Fax: 023 80 235292

HR@forestersfriendlysociety.co.uk

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Please delete as appropriate

Fitness and Propriety		YES	NO
1.1 a	Have you ever been convicted of any offence involving fraud, theft, false accounting or other dishonesty or an offence (whether or not in the United Kingdom) relating to companies, building societies, industrial and provident societies, credit unions, friendly societies, insurance, banking or other financial services, insolvency, consumer credit or consumer protection, money laundering, market manipulations or insider dealing? (Convictions spent under the Rehabilitation of Offenders Act 1974 must be included).	YES	NO
1.1 b	Are you the subject of any current criminal investigations?	YES	NO
1.2	Have you any convictions for any offences other than those listed in 1.1 above which are not spent, whether or not in the United Kingdom (excluding traffic offences unless these resulted in a ban from driving or involved driving without insurance)?	YES	NO
1.3 a	Are you or have you ever been, the subject of any civil proceedings, arbitration or litigation, including proceedings that may lead to a County Court Judgment ("CCJ") or other judgment debts, in the United Kingdom or elsewhere?	YES	NO
1.3 b	Are you aware of any intention to begin such proceedings against you in the future?	YES	NO
1.4	Do you have any judgment debts (including CCJs) made under a court order still outstanding, whether in full or part?	YES	NO
1.5	Have you ever failed to satisfy any such judgment debts within one year of the making of the order?	YES	NO
1.6 a	Are you, or have you ever been, the subject of any bankruptcy proceedings, or proceedings for the sequestration of your estate?	YES	NO
1.6 b	Have you ever entered into a deed of arrangement or an individual voluntary arrangement, (or in Scotland a trust deed) or other agreement in favour of your creditors, or is the applicant doing so?	YES	NO
1.7	Do you have any outstanding financial obligations arising from regulated activities, which you have conducted in the past, whether in the United Kingdom or overseas? (In the case of advisers, this will include any outstanding Liabilities arising from commissions paid for the sale of packaged products that have lapsed.)	YES	NO
1.8	Have you ever been found guilty of conducting any unauthorised regulated activities or been investigated for possible conduct of unauthorised regulated activities	YES	NO
1.9	Are you, or have you ever been, the subject of an investigation into allegations of misconduct or malpractice in connection with any business activity?	YES	NO
1.10	Have you ever, either in the United Kingdom, or elsewhere –		
a	been refused, restricted in, or had suspended, the right to carry on any trade, business or profession for which specific licence, authorisation, registration, membership or other permission is required?	YES	NO

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b	been disqualified by a court from acting as a director of a company or from acting in a management capacity or conducting the affairs of any company, partnership or unincorporated association?	YES	NO
c	been the subject of a disqualification direction under section 59 of the Financial Services Act 1986 or a prohibition order, under section 56 of the Financial Services and Markets Act 2000, or received a warning notice to make such a direction or order?	YES	NO
1.11	In respect of activities regulated by the FSA or any other regulatory body, have you, or has any company, partnership or unincorporated association of which you are or have been a controller, director, senior manager, partner or company secretary, during your association with that entity and for a period of three years after you ceased to be associated with it, ever –		
a	been refused, had revoked, restricted or terminated, any licence, authorisation, registration, notification, membership or other permission granted by any such body?	YES	NO
b	been criticised, censured, disciplined, suspended, expelled, fined, or been the subject of any other disciplinary or intervention action by any such body?	YES	NO
c	resigned whilst under investigation by, or been required to resign from, any such body?	YES	NO
d	decided, after making an application for any licence, authorisation, registration, notification, membership or other permission granted by any such body, not to proceed with it?	YES	NO
e	been the subject of any civil action which has resulted in a finding against the applicant or it by a court?	YES	NO
1.12	Has the company, partnership, or unincorporated association of which you are or have been a controller, director, senior manager, partner, or company secretary, in the United Kingdom or elsewhere, at any time during your involvement or within one year of such an involvement?		
a.	been adjudged by a court liable for any fraud, misfeasance, wrongful trading or other misconduct?	YES	NO
b.	been investigated or been involved in an investigation by an inspector appointed under companies or any other legislation, or required to produce documents to the Secretary of State, or any other authority, under any such legislation?	YES	NO
c.	been convicted of any criminal offence, censured, disciplined or publicly criticised, by any inquiry, by the Takeover Panel or any governmental or statutory authority or any other regulatory body (other than as already indicated under 1.11(b) above)?	YES	NO
d.	been placed into liquidation?	YES	NO
1.13	Have you ever had disciplinary action taken against you by any professional or trade body?	YES	NO
1.14	Have you ever been asked to resign as a director, trustee or fiduciary?	YES	NO

If you have answered “yes” to any of the above questions, please provide an explanation on an additional sheet

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Equal Opportunities Statement

Name _____ Date of Birth: _____

Your name is required for administrative purposes within Human Resources only

Please tick as appropriate

1. What is your gender? Female Male

2. What is your marital status? Please tick one box only.

<input type="checkbox"/> Single	<input type="checkbox"/> Married/Couple/Civil Partnership
<input type="checkbox"/> Separated (but still legally married)	<input type="checkbox"/> Divorced <input type="checkbox"/> Widowed

3. What is your country of birth? _____

4. What is your ethnic group (using the Census 2001 categories)?
Please read the list below and tick **one** box that most nearly describes your ethnic origin.

White

British Irish
Any other White background. Please describe _____

Mixed

White & Black Caribbean White and Black African White and Asian
Any other Mixed background. Please describe _____

Asian or Asian British

Indian Bangladeshi Pakistani
Any other Asian background. Please describe _____

Black or Black British

Caribbean African
Any other Black background. Please describe _____

Chinese or other ethnic group

Chinese
Any other ethnic group. Please describe _____

5. If you wish to do so, you may tick one of the following in addition to stating your ethnic group:

<input type="checkbox"/> English	<input type="checkbox"/> Northern Irish
<input type="checkbox"/> Scottish	<input type="checkbox"/> Welsh

6. Do you carry out a caring role for any of the following categories of people? Please tick all that apply.

<input type="checkbox"/> Child(ren) under 18	<input type="checkbox"/> Elderly relative(s)	<input type="checkbox"/> Child(ren) or relatives(s) with a disability
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7. If you believe you have a disability as defined by the Disability Discrimination Act, what type of disability do you have? Please tick all that apply.

<input type="checkbox"/> Blind/partially sighted	<input type="checkbox"/> Deaf/hearing impaired	<input type="checkbox"/> Wheelchair user
<input type="checkbox"/> Other mobility limitation	<input type="checkbox"/> Dyslexia or other specific learning difficulty	<input type="checkbox"/> Mental Health difficulty
<input type="checkbox"/> Speech difficulty	<input type="checkbox"/> Chronic medical condition or other unseen disability (e.g. asthma epilepsy)	