Application form

Personal information (confidential)

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| **Application for employment** | | | | | | | | | | |
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| Return this form to: Nicola White either email [nicola.white@fgct.co.uk](mailto:nicola.white@fgct.co.uk) or to call in or send to  Four Greens Community Trust, 15 Whiteigh Green, Whitleigh, Plymouth PL5 4DD  To be received no later than 12 noon on the 19th August 2022 | | | | | | | | | | |
| Position applied for: **Cooperative Food Organiser** | | | | | | | | | | |
| **Personal details** | | | | | | | | | | |
| Title: | |  | | | | | | | | |
| Name: | |  | | | | | | | | |
| Address: | | | | | | | | | | |
| Email: | |  | | | | | | | | |
| Telephone (landline): | |  | | | | | | | | |
| Telephone (mobile): | |  | | | | | | | | |
| National Insurance No: | |  | | | | | | | | |
|  | | | | | | | | | | |
| Do you hold a current driving licence? | | | | | Yes |  | | No | |  |
| If Yes | | | | | | | | | | |
| Expiry date: | | | | | | | | | | |
| Details of endorsements (if none, please insert “N/A”) | | | | | | | | | | |
| Do you have a current right to work in the UK? | | | | | Yes |  | | No | |  |
| If no, please provide details. | | | | | | | | | | |
| **Preferred working arrangement (please tick)** | | | | | | | | | | |
| Full time |  | | Part time |  | | | Job share | |  | |
| If you have ticked part time or job share, please give details below of your preferred working hours | | | | | | | | | | |
| **Education** | | | | | | | | | | |
| Please provide your education history here: | | | | | | | | | | |
| Schools/Colleges/University: | | | | Qualification gained: | | | | | | |
| **Employment history** | | | | | | | | | | |
| Name of employer(s) | | | Job title and main duties | | | | Date of departure and reason for leaving | | | |
|  | | |  | | | |  | | | |
| Please note here any other employment that you would continue with if you were to be successful in obtaining this role: | | | | | | | | | | |
| Please provide information below to say why you feel you would be a good fit for the role of Community Builder | | | | | | | | | | |
|  | | | | | | | | | | |
| Please note here any membership you hold of professional bodies, including grade of membership or other relevant details: | | | | | | | | | | |
| **Personal development** | | | | | | | | | | |
| Please include any courses, membership, voluntary work or responsibilities you have obtained that you consider relevant, with outcomes where applicable: | | | | | | | | | | |
|  | | | | | | | | | | |
| **Data protection statement** | | | | | | | | | | |
| All of the information collected in this form is necessary and relevant to the performance of the job applied for. We will use the information provided by you on this form, by the referees you have noted, and the educational institutions with whom we may undertake to verify your qualifications with, for recruitment purposes only. The Company will treat all personal information with the utmost confidentiality and in line with current data protection legislation. We rely on the lawful basis of *[insert lawful basis]* to process the information provided by you in this form.  Should you be successful in your application, the information provided, and further information which will be gathered at the relevant time, will be subsequently used for the administration of your employment and in relation to any legal challenge which may be made regarding our recruitment practices.  For more information on how we use the information you have provided, please see our privacy notice for job applicants which is *[delete as appropriate – attached to this form/located at [insert details]].* | | | | | | | | | | |
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| **Declaration** | | | | | | | | | | |
| I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment offered. I understand that any offer of employment is subject to the Company being satisfied with the results of series of relevant checks including references, eligibility to work in the UK, criminal convictions, probationary period and a medical report (in line with the operation of the Equality Act 2010). | | | | | | | | | | |
| **Signed:** | | | | | | | | | | |  | Date: |
|  | | | | | | | | | | |
| You may use a separate sheet to include more information on any of the above questions if necessary, marking clearly the page number. | | | | | | | | | | |