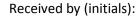
For office use only

Date received:





Job Application Form			
Vacancy Title: Please tell us how you hear	d about this vacancy:		
1. Personal de	tails		
Last Name:		First Name:	
Address:			
Postcode:			
Home Telephone No.	Daytime	e Contact No.	
Mobile Phone No.			
E-mail address:			
National Insurance No.		DOB:	
Are you free to remain and take up employment in the UK?			
<u>Driving Licence</u> (if relevant t	o post applied for)		
Do you hold a full, clean driving licence valid in the UK? Yes No			
If no, please give details below			
Do you own a car or have ac	cess to one?	Yes	No
You will be responsible for ensuring that you have the necessary vehicle insurance for use on business (if relevant to post)			
Have you previously been in employed by, Concorde or a If yes, please state position(s		Yes	No

2. Education/Qualifications

School (11+)	Study Dates	Qualification and Grade	Date Obtained
		and Grade	
College/University	Study Dates	Qualification and Grade	Date Obtained
Ongoing Professional Development	Study Dates	Qualification and Grade	Date Obtained
Training and Development			
	and a data that for a last	discount of the second	
post and supports your appli-		ning or non-qualification based development which	ch is relevant to the
Training Co	ourse	Course Details	
		(including length of course/nature of	training)
Current Membership of any Professional Body/Organisation Please give details:			
ricuse give details.			

3. Employment History

Previous Employment: Please include any previous experience (paid or unpaid), starting with the most recent first.

<u>Current or most recent employer</u>			
Name of Employer:			
Address:			
		Postcode:	
Desire a Hall			
Position Held:			
Date Started:	Reaso	on for leaving:	
Current or Salary on		Notice Period or	
leaving this post:		Leaving Date (if no longer employed):	
Brief description of duties:			

<u>Previous employer</u>				
Name of Employer:				
Address:				
	Postcode:			
Position Held:				
Date Started:	Reason for leaving:			
Salary on leaving this post:	Notice Period or Leaving Date (if no longer employed):			
Brief description of duties:				

Previous employer Name of Employer: Address: Postcode: **Position Held: Date Started: Reason for leaving: Notice Period or** Salary on Leaving Date (if no leaving this post: longer employed): **Brief description of duties:**

Continue on separate sheet if necessary

4. Health and absence record

Please state any periods of absence over the last 12 months giving number of days lost and reasons for each of these.

Dates	Reason for absence

Continue on separate sheet if necessary to cover the full 12 months prior to application

5. Information in support of your application

Skills, abilities and experience Please use this section to demonstrate why you think you would be suitable for the post by reference to the job description and person specification (and by giving examples and case studies). Please include all relevant information whether obtained through formal employment or voluntary/leisure activities. Attach and label any additional sheets used.	

Continue on a separate sheet if necessary

Disclosure at Standard level and this disclosure will include details of convictions.	
Please provide details below of any convictions which are not spent Offenders Act 1974:	under the terms of the Rehabilitation of
7. Disability Discrimination	Act
The Disability Discrimination Act 1995 protects people with disabilities applications from people with disabilities. The DDA defines a disabled impairment which has a substantial and adverse long term effect on activities'. Do you have a disability?	d person as 'someone who has a physical or mental
If yes, please give details:	
If, as a result of your disability, you should require any particular arr give details below:	rangements to be made for your interview please

Convictions/ Disqualifications

6.

8.

References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your referees are.

Reference 1	Reference 2	
Name:	Name:	
Job Title:	Job Title:	
Organisation:	Organisation:	
Address:	Address:	
Contact No: Email:	Contact No: Email:	
How is this person known to you:	How is this person known to you:	
Do you wish to be consulted before this referee is approached:	Do you wish to be consulted before this referee is approached:	
Yes No	Yes No	

We reserve the right to contact any of your other previous employers within the last three years.

9. Declaration

Statement to be Signed by the Applicant

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I agree that Concorde IT Group can create and maintain computer and paper records of my personal data and that this will be processed and stored in accordance with the Data Protection Act 1998.

I confirm that all the information given by me on this form is correct and accurate and I understand that if any of the information I have provided is later found to be false or misleading, any offer of employment may be withdrawn or employment terminated.

Signadu	Data	
Signed:	Date:	

If you return this form by email, you will be asked to sign your application at interview.

10. Submitting your application

By Hand or Post:

HR Manager Concorde IT Group Beacon Lodge Texas Street Leeds West Yorkshire LS27 OHG By E-Mail: hr@concordeitgroup.com Enquiries:

Telephone: 08432 480000