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**Application for employment**

The information you provide on this form will be used as the basis for short-listing and selection. You are advised to read all the background information carefully and ensure that you complete the form as fully as possible. The job description provides you with information about the job and all the skills, experience, personal qualities and qualifications needed to carry it out.

Please return your completed form via email [SandyHinks@moonexecsearch.com](mailto:SandyHinks@moonexecsearch.com)

If you do not hear from us by the interview date shown on the job advertisement please assume on this occasion you have been unsuccessful.

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| --- |
| Post title: |
| Post reference (if applicable): |
| Where did you FIRST see the post advertised? |

**Personal information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Title: | | | | First name: | | |
| Surname: | | | | Middle names: | | |
| Address: | | | | | | |
|  | | | | Postcode: | | |
| E-mail: | | | | Mobile no.: | | |
| Home telephone no.: | | | | Work telephone no.: | | |
| National insurance no.: | | | | | | |
| Please confirm your current status in terms of entitlement to work in the UK: Tick one  British citizen  Overseas national with permission to work in the UK  If yes, Please outline reasons below:-    Overseas national currently without permission to work in the UK  *If employment is offered, you will be required to produce original documentary evidence confirming your entitlement to work in the UK.* | | | | | | |
| Please specify any language skills you possess, including level of competence | | | | | | |
| Basic |  | Conversational |  | | Fluent |  |

**Qualifications**

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| --- | --- | --- | --- |
| **Secondary/higher education** | | | |
| Name of school, college,  university | Full or  part-time | From - To | Qualifications and grades |
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| **Vocational training and/or professional memberships held** | | |
| Name of course | Qualification/Level obtained | Date obtained |
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**Employment experience**

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| --- | --- | --- | --- |
| **Current or most recent employment** | | | |
| Name and address of employer: | | | |
| Position held: | | | |
| Brief description of duties and responsibilities: | | | |
| Period of appointment:  (dd/mm/yy) | Full or  part-time: | Salary/ pay grade: | Period of notice required: |
|  |  |  |  |
| Reason for leaving: | | | |

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| --- | --- | --- | --- | --- |
| **Previous employment,** (most recent first) Please specify exact employment dates (DD/MM/YY) | | | | |
| Name and Address of Employer | Post Held | Full or  Part-Time | From To | Reason for leaving |
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**Additional information**

Please give reasons why you wish to apply for this post. Give details of any experience or training   
you have had which you consider to be relevant, together with any other information you wish to   
add in support of your application.

When doing so please refer to the skills & experience referenced within the job description and personal specification as this will be used to form the basis of the shortlisting process.

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Are you related to or have a relationship with a Trustee or employee of the West of England Sport Trust (Wesport).

Yes  No

If so, please give details:

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**Referees**

Please provide the details of two referees.

One of your referees should be your current or most recent line manager or employer. If you have had no or limited previous employment please provide referees from your school, college or training scheme or from any voluntary/temporary work.

Do not include family members or friends.

References will only be taken up if you are offered the role.

|  |  |  |
| --- | --- | --- |
| **Current/most recent employer**  Please give the name of a referee from your current or most recent employer with line management  responsibility for your role. | | |
| Name (including title): |  | Position: |
| Address: |  | e-mail address: |
|  | Telephone no.: |
| **Second referee** | | |
| Name (including title): |  | Position: |
| Address: |  | e-mail address: |
|  | Telephone no.: |

Signature:       Date:

Please PRINT name:

If you are sending this application form to Moon Charity Practice by e-mail then in the absence of this signature you should note that the e-mailing of this application constitutes your personal certification that the details in this application are correct.