

themungofoundation

JOB APPLICATION FORM

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS AND USE BLACK INK.

Post: _____

Ref No: _____

Location: _____

Where Advertised: _____

PERSONAL DETAILS

Last Name: _____ First Name(s): _____

Address: _____ Daytime Tel: _____

_____ Work Tel: _____

_____ Post Code: _____

Car Owner: Yes / No

Driving License Held: Yes / No

I am a UK or EU Citizen and do not need a work permit.

I am not a UK or EU Citizen and have a valid work permit. Expiry Date: _____

Do you consider yourself to have a disability? YES / NO

If yes, please supply details, mentioning any assistance you may require in order to attend an interview.



The Mungo Foundation is a Positive About Disability Employer. If you are disabled as defined under the Disability Discrimination Act 1995 and meet the essential criteria of the person specification for the job you will be guaranteed an interview for the post.

QUALIFICATIONS (Academic / Professional)

DETAILS OF ANY RELEVANT TRAINING (including any short courses)

PLEASE PROVIDE DETAILS OF ANY MEMBERSHIP OF PROFESSIONAL BODIES

--

PRESENT / MOST RECENT EMPLOYMENT

Name of Employer: _____	Post Held: _____
Address: _____ _____	
Period of Employment: _____	Current Salary: _____
Reason for Leaving: _____	Notice Period: _____
Please outline your main duties: _____ _____ _____	

PAST EMPLOYMENT

Please provide details of your previous work experience starting with your most recent first. This can include any unpaid or voluntary work that you may have undertaken. Continue on a separate sheet if necessary.

Name & Address of Employer	From – To (Month / Year)	Post held and brief outline of duties	Reason for Leaving

ADDITIONAL INFORMATION

After reading the job description and person specification please say why you are applying for this post and highlight any knowledge, experience or skills you think are relevant. Please include any skills or experience that may have been gained through voluntary work, unpaid work, community activities or through domestic or family experience.

Please continue on a separate sheet if necessary.

HEALTH INFORMATION

SICK LEAVE IN LAST 2 YEARS:

Total No of Absences:

Total No of Working Days Lost:

If you have any illness or medical conditions which might impair your ability to perform the duties of this post please give details:

REFERENCES

Please supply the names and full postal addresses of two referees. One of these should be your current or most recent employer. Character references are only acceptable in the event that career history shows only one employer. Relatives should not be given as referees.

Name: _____

Name: _____

Organisation: _____

Organisation: _____

Address: _____

Address: _____

Tel No: _____

Tel No: _____

** Employer / Character*

** Please delete as applicable*

** Employer / Character*

Can these references be taken up prior to interview?

Yes / No

Yes / No

I declare that the details given in this application form are accurate and I accept that if any of the details are subsequently found to be false, this may be sufficient cause for rejection or, if employed, dismissal.

SIGNATURE: _____

Date: _____

Completed application forms should be submitted to:

Human Resources Department

The Mungo Foundation

196 Clyde Street

Glasgow, G1 4JY

Tel: 0141 226 1610 Fax: 0141.225.2600

E-Mail: vacancies@themungofoundation.org.uk

FOR OFFICIAL USE ONLY:

Proceed to interview: Yes / No

Signed: _____
(Service Manager / Project Manager)

Date: _____