

APPLICATION FOR EMPLOYMENT Please print clearly in black ink. Complete all sections. Sign and date the form. Please do not submit CV's. Application form only.

Position a	lied for:
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1 PERSONAL DETAILS

Surname:	Forename(s):
	Preferred name:
Contact Address:	
Post Code:	
Tel. No. (Home):	Tel. No. (Work):
Tel. Mobile:	
Email address:	
Are you deemed as being 'entitled' or 'entitled to work' Yes / No	under the Control of Housing and Work (Jersey) 2012?

2(a) EDUCATIONAL/PROFESSIONAL QUALIFICATIONS Secondary Education

	• • •		
Qualification	Grade	Qualification	Grade

Further Education

Course, e.g.: GNVQ / NVQ/	Dates	Course Title	Standard
Special Training/Languages	From/To		Attained
Diploma/Degree or equivalent			

2(b) MEMBERSHIP OF PROFESSIONAL BODIES

3 (a) COMPETENCIES

Please give a brief account of any particular training, experience or skills you have relevant to the post. Specifically relate this to the competencies in the job description. (Continue on a separate sheet if necessary.)

3(b) ADDITIONAL INFORMATION

, Please detail any additional information which would support your application. (Continue on a separate sheet if necessary.)

4 DRIVING LICENCE

Do you hold a current driving licence? YES / NO

5 EMPLOYMENT HISTORY

Starting with your present post, list in reverse order every employment you have had. Please describe your last three jobs in detail so that we can compare your experience with the requirements of the job for which you are applying.

(a) Present or most recent employment

From Month/Year	To Month/Year	Title of Post:
Name and address	of employer:	
		Number of employees supervised by you:
Nature of business:		Period of notice:
Precise reasons for I	leaving or wishing to le	ave:
Description of your d	luties:	

(b) Previous employment				
From	То	Title of Post:		
Month/Year	Month/Year			
Name and address	of employer:			
			Number of employees	
			supervised by you:	
Nature of business:				
Precise reasons for I	eaving:			
Description of your d	uties:			

(c) Previous emp	loyment		
From	То	Title of Post:	
Month/Year	Month/Year		
Name and address	of employer:		
		Number of employees	
		supervised by you:	
Nature of business:			
Precise reasons for	leaving:		
Description of your of	duties:		

(d) Previous employment (If there is not sufficient space on the form, please continue on a separate sheet.)				
Dat	es	Name and address of employer	Title of Post	
From	То			

6 (a) REFERENCES

Jersey Employment Trust reserves the right to approach your previous employers without your permission for a reference before offering employment. However, we will not approach your present employer prior to interview without your agreement. Referees should not be related to you.

* I do / do not wish my present employer to be contacted before interview. * Delete as appropriate

(b) An enhanced DBS check is required for this post at the offer of employment stage

Reference 1 Present Employer	Reference 2 Previous Employer
Name	Name
Address	Address
Post Code	Post Code
Tel. No:	Tel. No:
Email address:	Email address:

7 SPECIAL REQUIREMENTS

Any special requirements if selected for interview? (e.g. disabled access)

DECLARATION

I hereby declare that the details shown are correct and complete to the best of my knowledge. I understand that any false statements or the withholding of any relevant information may provide grounds for rejection of my application, or termination of my contract of employment. I understand that the Jersey Employment Trust will process this application subject to the Data Protection (Jersey) Law 2018. The applicant privacy statement can be found at - https://www.jet.co.je/job-vacancies-at-jet.aspx

Applicant's signature:

Date:....

Please return your form to: JERSEY EMPLOYMENT TRUST THE OAKFIELD BUILDING LA RUE DU FROID VENT ST SAVIOUR JE2 7LJ