

Application Form

Please complete the form in full, unless any of the information is already covered in your CV, and return to the People and Organisational Development Team at recruitment@cysticfibrosis.org.uk.

Job details				
Position				
How did you find out about the vacancy?				
Personal details				
Title			Name	
Address				
Email address				
Telephone number			Mobile	
If you are not a member of the European Economic Area please state your entitlement to work in the UK				
Are you currently a supporter of the Cystic Fibrosis Trust?	Yes	No		

Education and qualifications (you do not need to fill this in if you have already covered it in your CV)					
Schools/Colleges/Universities	From	То	Qualifications gained	Grades	

Fighting for a Life Unlimited

Employment histo	ory (you do not ne	ed to fill t	his in if you have	already cove	red it in your CV)
Name of last/current employer					
Address					
Job title					
Type of business					
From		То		Salary	
Reason for leaving					
Notice period					
Please state your main duties and responsibilities					

Please list below all of your previous employers starting with the most recent, unless this information is already included in your CV. Please provide a full employment history and explain all employment gaps. Continue on a separate sheet if necessary.

Name, address and telephone number for each employer	From	То	Job title and main duties	Reason for leaving

Supporting Information

Please state the reasons why you wish to apply for this post, details of the experience/training/skills that you have which meet the requirements of the Job Description and Person Specification and any additional information that supports your application. Continue on to a separate sheet if necessary.

Other information

Please state below any preferences or restrictions in working hours.

Please state when you would be available to commence employment?		
If you have any holidays booked please advise us of the dates.		
Do you have a current driving licence?	Yes	No

References

All offers of employment are subject to two references satisfactory to the Cystic Fibrosis Trust. Please give the details below of two referees one must be your present employer and the other should be a previous employer. If this is not possible then please detail someone in a position of responsibility who has known you professionally or personally for more than one year.

Please note that references will not be applied for until an offer of employment has been issued and accepted.

Name	Name	
Job title	Job title	
Company name	Company name	
Address	Address	
Telephone number	Telephone number	
Email	Email	

Rehabilitation of Offenders Act 1978

Due to the nature of the work for which you are applying, this post is exempt from the provisions of the Rehabilitations of Offenders Act 1974 (Exceptions) Order 1975 (Exceptions) (Amendments) Order 1986. You are therefore not entitled to withhold any information about convictions/ bind overs/cautions/reprimands or warnings. Any failure to disclose these my disqualify you from employment or may in summary dismissal by the Cystic Fibrosis Trust once employment has commenced.

Do you have any convictions/bind overs/cautions/reprimands or warnings?	Yes No

You will not necessarily be barred from employment if you have a criminal record; The Cystic Fibrosis Trust management will consider the individual circumstances case by case.

Are you, or have you been the subject of any police investigation and/or	Yes	No
prosecution in the UK or any other country?		

If you have answered yes to the above please give details below.

Data protection act 1998

The information on this form and associated forms will be used as follows:

- Copied to Interviewing Panel and accessed by relevant Senior Management and People and Organisational Development.
- Used for ethnic and gender monitoring.
- In the case of a non-appointment will be retained for a period not exceeding 12 months.
- If appointed the information obtained on this form will be placed in the POD Database and will be accessed by Senior Management, POD and Payroll Departments only. It will then be retained for periods as set out in the relevant Cystic Fibrosis Trust policy.
- By signing this form you are agreeing to those arrangements. You also will have given explicit consent to Cystic Fibrosis Trust to retain information regarding gender racial or ethnic origin, religious beliefs and physical health.

Declaration

I understand that the appointment is subject to the information on this form being correct and I declare this to be the case. If any statement given is false or misleading I understand this will lead to dismissal.

I attach the equal opportunities form and I understand that any appointment is subject to satisfactory medical clearance relevant to the duties for the position applied for.

Criminal or other declarations (please tick as appropriate)

I have no declarations to make

I have attached details of my declaration on a piece of paper

Signed	Date