

## WYCHAVON LEISURE COMMUNITY ASSOCIATION APPLICATION FOR EMPLOYMENT

**PRIVATE AND CONFIDENTIAL**  
 Return this form to : Wychavon Leisure Community Association Ltd  
 King Georges Way  
 Pershore  
 Worcestershire  
 WR10 1QU

Ref No: \_\_\_\_\_

POSITION APPLIED FOR \_\_\_\_\_

Surname	Forename(s)	Marital Status
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Address \_\_\_\_\_

Postcode \_\_\_\_\_

Telephone Number	Mobile Number
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Do you hold a current driving licence? Yes/No	Do you own a car Yes/No
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Is there anything that is likely to impact on your employment with WLCA within the following periods Yes/No  
 1 month  3 months  6 months  9 months  (if yes please specify)

### EDUCATION HISTORY

Schools/colleges/university	Qualifications gained

### EMPLOYMENT HISTORY (please complete in full and use a separate sheet is necessary)

From – To	Name & Address of Employer	Job Title	Duties	Rate of Pay	Reason for leaving

Notice required for current post: \_\_\_\_\_

**OTHER EMPLOYMENT**

Please note any other employment you would continue with if you were to be successful in obtaining this position.

**REFERENCES**

Please note here the names and addresses of two persons from whom we may obtain both character and work experience references.

1.	2.
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**CRIMINAL RECORD**

Please note any criminal convictions except those 'spent' under the Rehabilitation of Offenders Act 1974. In certain circumstances employment is dependant upon obtaining a satisfactory basic disclosure from the Criminal Records Bureau

**EXPERIENCE**

Candidates are invited to state details of relevant experience (continue on separate sheet if necessary).

**DECLARATION (Please read this carefully before signing this application)**

- 1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
- 2. Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor. I agree that the organisation reserves the right to require me to undergo a medical examination. In addition, I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act.

Signed:..... Date:.....

## EQUAL OPPORTUNITIES

### PLEASE COMPLETE THIS QUESTIONNAIRE AND RETURN IT WITH YOUR APPLICATION FORM

Wychavon Leisure is an equal opportunity employer. The aim of our policy is to ensure that no job applicant or employee receives less favourable treatment on the grounds of race, colour, ethnic or national origin, religious belief, political opinion or affiliation, sex, marital status, sexual orientation, gender reassignment, age or disability, or is disadvantaged by conditions or requirements which cannot be shown to be justified.

In order that we can monitor and produce statistical analyses would you kindly please provide the information requested below. Your answers will be treated confidentially and will not affect your job application in any way. This part of the form will be retained by personnel and will not be used in the selection process.

Please tick one box for your ethnic group and one box for your sex.

#### A) White

- English
  Scottish  
 Welsh
  Irish  
 Any other White background, please specify.....

#### B) Mixed

- White and Black Caribbean
  White and Black African  
 White and Asian  
 Any other Mixed background, please specify.....

#### C) Asian, Asian British, Asian English, Asian Scottish or Asian Welsh

- Indian
  Pakistani  
 Bangladeshi  
 Any other Asian background, please specify.....

#### D) Black, Black British, Black English, Black Scottish or Black Welsh

- Caribbean
  African  
 Any other Black background, please specify.....

#### E) Chinese, Chinese British, Chinese English, Chinese Scottish or Chinese Welsh

- Chinese  
 Any other background, please specify.....

#### F) Sex

- Male
  Female

Name:..... Date of Birth.....

Date:..... Job Title:.....

Signed:..... Job Reference No:.....