

## Job Application Form

Title of post applied for:	Closing Date:	
How did you hear about	Return	recruitment@vegansesiety.com
this vacancy?	application to:	recruitment@vegansociety.com

To save this form, edit it in the Microsoft Edge browser and select the 'save' button or using the free Adobe Acrobat Reader software. To save in Google Chrome, you will need to select print and the 'Save as PDF' option but the form will no longer be editable.

Before completing this form, please read the accompanying guidance notes. Please write clearing in black ink or type.

## Confidential

1. PERSONAL DETAILS (E	BLOCK C	CAPITALS PLE	EASE)	
Surname:			Initials:	
Former surnames if different:				
Address:		Tel No (home):		
			Tel No (business):	
			Tel No (mobile):	
			Fax No:	
E-Mail address:			Nat. Insurance No:	
Nationality:		-	·	European Citizen, or you do not UK, you will require a work
Do you need a work  permit to be employed in  Yes  If you already		-	ave a work permit, when do at your current work permit	pes it expire? It may not be valid for this post.)
Preferred work arrangemen	ts:	☐ Full-time	☐ Job share ☐ Ter	m time 30 hrs a week

## Secondary School / Dates Examinations taken Date Result College / University From То Professional Qualifications currently held: how obtained, grade and date Other relevant Educational or Training Courses, with dates

2. EDUCATION AND PROFESSIONAL QUALIFICATIONS

Employer:  Address:  Date Commenced: Date Ended (if applicable):  Please outline your responsibilities, to whom you are responsible and staff responsible to you (if applicable):  Reason for leaving or wishing to eave: Period of notice required to terminate present employment:	Title of Post:	Salary/Grade:
Date Ended (if applicable):  Please outline your responsibilities, to whom you are responsible and staff responsible to you (if applicable):  Reason for leaving or wishing to eave:  Period of notice required to terminate present employment:	Name of Employer:	Business of Employer:
Date Ended (if	<u>.</u>	Date Commenced:
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Reason for leaving or wishing to leave: Period of notice required to terminate present employment:		
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Period of notice required to terminate present employment:	Reason for leaving or wishing to	
employment:		
		nate present
		l are available for interview:

Name and	Position held	Reason for	Date	Date Ended	Final
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Description of d	uties:				
Name and Address of Employers	Position held	Reason for leaving	Date Commenced:	Date Ended	Final grade/salary
Description of d	uties:				

Read the Person Specification carefully
Give <u>specific examples</u> from your past work experience
<ul> <li>Use <u>details</u> of a situation, what you did and the outcome</li> </ul>
Write a <u>maximum of 500 words</u>
5. RELEVANT SKILLS, ABILITIES, KNOWLEDGE, EXPERIENCE AND YOUR REASONS FOR APPLYING FOR THIS JOB

As far as is possible and practicable	, I will adhere to a Vega	n diet and lifestyle.	☐ Yes ☐ No	
I am willing and able to undertake a required.	appropriate training and	development as	☐ Yes ☐ No	
What activities outside work interes	st you? (State any position	ons held you consider	relevant.)	
Do you hold a current driving licence?	☐ Yes ☐ No	Do you have access to	a car? Yes No	
Disabilities				
account of a disability?			☐ Yes ☐ NO	
account of a disability? If "yes", please give brief details of t information that you feel would he	he effects of your disab	ility on your day-to-da	ay activities, and any othe	
account of a disability?  If "yes", please give brief details of t information that you feel would he obligations under the Equality Act 2  Rehabilitation of Offenders Act 19	he effects of your disable us to accommodate ventors.	ility on your day-to-da your needs during you 1975	ay activities, and any othe	
account of a disability?  If "yes", please give brief details of t information that you feel would he obligations under the Equality Act 2  Rehabilitation of Offenders Act 19  Have you any convictions that are in Act?	he effects of your disable us to accommodate your disable of the second	ility on your day-to-da your needs during you <b>1975</b> itation of Offenders	ay activities, and any other interview and fulfill our	
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If selected for interview, do you red account of a disability?  If "yes", please give brief details of the information that you feel would he obligations under the Equality Act 2  Rehabilitation of Offenders Act 19  Have you any convictions that are in Act?  If Yes, please provide further details	he effects of your disable us to accommodate your disable of the second	ility on your day-to-da your needs during you <b>1975</b> itation of Offenders	ay activities, and any other interview and fulfill our	
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			Referee 2		
Title (Mr, Mrs etc):			Title (Mr, Mrs etc):		
Full Name:			Full Name:		
Job Title:			Job Title:		
Organisation:			Organisation:		
Address:			Address:		
Tel No:			Tel No:		
E-mail address:			E-mail address:		
Fax No:			Fax No:		
Please state if we may obtain this reference prior to interview.		Please state if we ma	3	☐ Yes ☐ No	
	ig information on t		on form is true and com lade any omissions, this		
I declare that the in given any misleadin	ig information on t				