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| Yeovil Town Football Club  Job Application Form |

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| Title of post applied for: |  | Job Ref: |  |

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

### Confidential

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| **1. PERSONAL DETAILS** (BLOCK CAPITALS PLEASE)   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Surname: | |  | | | Initials: |  | | Former surnames if different: | |  | | | Preferred Name or Title (Optional): |  | | Address: | | | | | Tel No (home): |  | | Tel No (business): |  | | <Town> <Post Code> | | | | | Tel No (mobile): |  | | E-Mail address: | | |  | | Nat. Insurance No: |  | | Nationality: |  | | | If you are not a British passport holder or a European Citizen, or you do not have the permanent right to remain in the UK, you will require a work permit. | | | | Do you need a work permit to be employed in the UK? | | | Yes  No | If you already have a work permit, when does it expire?  (Please note that your current work permit may not be valid for this post.) | | | | Where did you learn of the post? | | | |  | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Preferred work arrangements: | Full-time | Job share | Term time only | 30 hrs a week | |

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| **2. EDUCATION AND PROFESSIONAL QUALIFICATIONS**  (Original documents as proof of qualification will be required at interview)   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Secondary School / College / University | Dates | | Examinations taken | Date | Result | | From | To | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |

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| |  | | --- | | Professional Qualifications currently held: how obtained, grade and date |  |  | | --- | | Other relevant Educational or Training Courses, with dates | |

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| **3. PRESENT POST**   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Title of Post: |  | | | Salary/Grade: | |  | | Name of Employer: |  | | | Business of Employer: | |  | | Address: | | | | Date Commenced: | |  | | Date Ended (if applicable): | |  | |  | | | |  | |  | | <Town> | | <Post Code> | |  | |  | | Please outline your responsibilities, to whom you are responsible and staff responsible to you (if applicable): | | | | | | | | Reason for leaving or wishing to leave: | | |  | | | | | Period of notice required to terminate present employment: | | | | |  | | | Please notify us of any dates you are available for interview: | | | | | | | |

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| **4. PREVIOUS EMPLOYMENT**  (Please use continuation sheet if necessary.)   |  |  |  |  | | --- | --- | --- | --- | | Name and Address of Employers | Position held | Reason for leaving | Final grade/salary | | | <Name of Employer>  <Address 1>  <Address 2>  <Address 3>  <Post Code> |  |  |  | | Description of duties: | | | | |  | | | | | <Name of Employer>  <Address 1>  <Address 2>  <Address 3>  <Post Code> |  |  |  | | Description of duties: | | | | |  | | | | | <Name of Employer>  <Address 1>  <Address 2>  <Address 3>  <Post Code> |  |  |  | | Description of duties: | | | | |  | | | | | <Name of Employer>  <Address 1>  <Address 2>  <Address 3>  <Post Code> |  |  |  | | Description of duties: | | | | |  | | | | |

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| **5. RELEVANT SKILLS, ABILITIES, KNOWLEDGE, EXPERIENCE AND YOUR REASONS FOR APPLYING FOR THIS JOB** |

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| **6. OTHER INFORMATION**  **Safeguarding**   |  |  |  |  | | --- | --- | --- | --- | | Safeguarding: Please outline your safeguarding training and experience (Please include training bodies and dates) | | | | | Do you hold a current driving licence? | Yes  No | Do you have access to a car? | Yes  No |  |  |  | | --- | --- | | Disabilities | | | If selected for interview, do you require any special arrangements to be made on account of a disability? | Yes  No | | If “yes”, please give brief details of the effects of your disability on your day-to-day activities, and any other information that you feel would help us to accommodate your needs during your interview and fulfil our obligations under the Equality Act 2010: | |  |  |  | | --- | --- | | Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 | | | Have you any convictions that are not spent under Rehabilitation of Offenders Act? | Yes  No | | If Yes, please provide further details: [Spent convictions do not have to be declared]    [As this post is covered by the Rehabilitation of Offenders Act 1974(Exceptions) Order 1975, both spent and unspent convictions must be declared] | | |

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| **7. REFERENCES**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | Referee 1 | | | | Referee 2 | | | | | Title (Mr, Mrs etc): |  | | | Title (Mr, Mrs etc): |  | | | | Full Name: |  | | | Full Name: |  | | | | Job Title: |  | | | Job Title: |  | | | | Organisation: |  | | | Organisation: |  | | | | Address: | | | | Address: | | | | |  | | | |  | | | | | <Town> | | <Post Code> | | <Town> | | <Post Code> | | | Tel No: |  | | | Tel No: |  | | | | E-mail address: |  | | | E-mail address: |  | | | | Please state if we may obtain this reference prior to interview. | | | Yes  No | Please state if we may obtain this reference prior to interview. | | | Yes  No | |

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| **8. DECLARATION**   |  |  |  |  | | --- | --- | --- | --- | | I declare that the information given in this application form is true and complete. I understand that if I have given any misleading information on this form or made any omissions, this will be sufficient grounds for terminating my employment. | | | | | Signature: |  | Date: |  | | Name: |  |  | | | The information provided by you on this form may be processed for purposes permitted by the General Data Protection Regulation. You have, on written request, the right of access to personal data held about you. The company treats personal data collected during the recruitment process in accordance with our Data Protection Policy.  All eligible job offers will be subject to a successful DBS application (where required) | | | | |