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| **CANDIDATE APPLICATION FORM**  **CONFIDENTIAL** | |
| **JOB ROLE** | |
| Role you are applying for: |  |
| Where did you see or hear about this vacancy? |  |
| **PERSONAL DETAILS** | |
| Title (Mr/Mrs/Miss/Ms/Mx etc.): |  |
| Surname: |  |
| First Name(s): |  |
| Preferred/Known as Name: |  |
| Telephone Number: |  |
| E-mail Address: |  |
| Home Address: |  |
| Postal Address (if different from home address): |  |
| Do you hold a full current UK driving licence? |  |
| Do you hold a valid UK Passport? |  |
| Please provide the dates of issue and expiry: |  |
| Do you require a Visa or Settlement Status to work in the UK? |  |
| If you require a Visa or Settlement Status, what type do you hold and when does it expire? |  |
| Please give details of any reasonable adjustments you may require, to assist you with your application, attendance at interview, skills testing or to carry out the job role: |  |
| If you have been convicted of a criminal offence, please provide brief details, including dates and reason(s) of conviction(s). Do NOT include ‘spent’ convictions, unless the role you are applying for is covered by the Rehabilitation of Offenders Exemption Order 1975 then all criminal convictions MUST be declared, regardless of when they occurred. |  |
| Please give details of any other work/voluntary commitments you have: |  |
| **CURRENT/MOST RECENT EMPLOYMENT** | |
| Name of Current/Last Employer/College/University |  |
| Address of Current/Last Employer/College/University |  |
| Position Held: |  |
| Type of Contract: | Permanent, Fixed Term, Agency Temp, Contractor, Self-Employed *(Please delete as appropriate)* |
| Start Date: |  |
| End Date: |  |
| Reason for Leaving/Seeking New Employment: |  |
| Desired Salary: |  |
| Notice period: |  |
| Please provide dates of any pre-booked holidays |  |
| When would you be available to start work? |  |
| **DECLARATION** | |
| I declare the information I have provided on this application form and within my CV is true and accurate. Furthermore, I understand a false declaration resulting in my appointment, may render me liable for dismissal.  Yours sincerely  Name Surname  Title  Name: Date:  Signature: | |
| **PLEASE SUBMIT THIS COMPLETED FORM, TOGETHER WITH YOUR COVER LETTER AND CV TO** [**capa.recruiting@cwgc.org**](mailto:capa.recruiting@cwgc.org) | |

Information from this application may be processed for purposes permitted under the General Data Protection Regulation. Information about how your data is used and the basis for processing your data is provided in our Job Applicant Privacy Notice published on our website.

*We value the differences that a diverse workforce brings and are committed to creating a respectful work environment where everyone is treated with dignity and respect and where any unlawful and/or unfair discrimination is eliminated. We will not unlawfully discriminate directly or indirectly in recruitment or employment on grounds of sex, gender reassignment, pregnancy, race, colour, nationality, ethnic or national origins, age, sexual orientation or marital status, religion or belief.*