| **Application for the role of:** |  |
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| **Location:** |  |
| **Closing date:** | **9th February 2025** |

| 1. **Personal Details** |
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| **Preferred Title** |  |
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| **First Name** |  |
| **Last Name** |  |
| **Home Address & Postcode** |  |
| **Daytime Telephone** |  |
| **Mobile Telephone** |  |
| **E-mail Address** |  |
| **Do you hold a current UK Driving Licence?** |  |
| **Date of Birth** |  |

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| 1. **Current or Most Recent Employment** |

| **Current / Previous Employer’s Name** |  |
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| **Address and Type of Business** |  |
| **Job Title** |  |
| **Start Date** |  |
| **Salary / Hourly Rate** |  |
| **Reason for Leaving /Seeking a Change** |  |
| **Notice Period** |  |
| **Brief Description of Main Duties** |  |

| 1. **Previous Employment & Work Experience**  * **List all previous employers / voluntary experience since leaving school with your most recent employer first** * **Please account for any gaps in employment in chronological order** | | | | | | | | | | |
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| **Employer’s Name and Address** | **Position Held** | | | | **From** | | **To** | | | **Brief Description of Responsibilities and Reason for Leaving** |
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| 1. **Education** | | | | | | | | | | |
| **Secondary School/College/University** | | | **From** | **To** | | | | **Qualifications (GCSEs; A-Levels; Degree etc)** | | |
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| 1. **Training and Professional Qualifications** | | | | | | | | | | |
| **Course Title, Level and Subject** | | **Training Organisation** | | | | | | | **Date and Duration** | |
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| 1. **Professional Membership** | | | | | | | | | | |
| **Are you a member of a professional organisation?** | | | | | |  | | | | |
| **Name of professional organisation** | | | | | |  | | | | |
| **Membership level** | | | | | |  | | | | |

| 1. **Health** | |
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| **Please note that the completion of this section is voluntary.** |  |
| **Is there anything concerning your medical history or state of health that is relevant to your application?** |  |
| **If yes, please provide details:** |  |
| **How many days of work have you missed in the last twelve months due to illness or injury?** |  |

1. **Professional Qualifications / Membership**

| 1. **Languages** |
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| **Please tell us of other languages in which you are fluent:** |  |
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| 1. **Knowledge, Experience, Skills and Qualities**  * Please use this section to describe how your knowledge, experience, skills and qualities match to the job description. * Please focus your answers on providing relevant examples from previous work / volunteer experience and how you demonstrate the skills and qualities required for this role * Please limit to 500 words | |
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| 1. **Immigration, Asylum and Nationality Act (2006)**   Under Immigration, Asylum and Nationality Act (2006) we are required to check that members of staff are legally entitled to work in this country. If you are successful in your application we will ask you for more information, but in the meantime please let us know your national insurance number. | |
| **National Insurance Number** |  |
| **Are you legally entitled to work in the UK?** |  |

**REHABILITATION OF OFFENDERS ACT 1974**

Because of the nature of some aspects of the work for which you are applying, this post is exempt from the provision of Section 4 [ii] of the Rehabilitation of Offenders Act, 1974, by virtue of the Rehabilitation of Offenders Act 1974 [Exemptions] Order 1975, and you are therefore not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provisions of the Act and, in the event of appointment, any failure to disclose such convictions could result in the withdrawal of approval to work with AT The Bus.

Have you ever been convicted of a criminal offence, or are you at present the subject of criminal charges?

**YES** / **NO** (please delete as appropriate)

If YES, please give details:

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| 1. **References**   Please give the names and addresses of two people who can provide an assessment of your suitability for this post. If you are employed or have been employed, please give your current or most recent employer. | | |
| **Name** |  | |
| **Address** |  | |
| **Telephone Number** |  | |
| **Email** |  | |
| **Relationship to you** |  | |
| **May we approach this person to ask for a reference for you?** |  | |
|  | | |
| **Name** |  | |
| **Address** |  | |
| **Telephone Number** |  | |
| **Email** |  | |
| **Relationship to you** |  | |
| **May we approach this person to ask for a reference for you?** |  | |
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| AT The Bus is an equal opportunities employer.  **AT The Bus is fully committed to safeguarding and promoting the welfare of children and expects all staff and volunteers to share this commitment.** | | |
| 1. **Declaration**   I declare that to my knowledge, the information on this application and submitted on any accompanying documents is full and correct. I understand that if I have given false or misleading information or withheld any information in this application, AT The Bus may withdraw any offer made to me or dismiss me if I am appointed.  I acknowledge that it is my responsibility as the candidate, if invited for interview, to disclose any information to the interviewers which may affect working with children and/or vulnerable adults.  I understand that if my application is successful, an Enhanced Level DBS is required for this role.  In accordance with the Data Protection Act 1998 as part of this application you give AT The Bus permission to collect, retain and process information about you. The information you provide in this application will only be used for the purpose of assessing your suitability for employment, for monitoring our compliance with the law and best practice in terms of equal opportunity and non-discrimination. If your application is unsuccessful it will be kept for 12 months and then confidentially destroyed. For further information please see our GDPR and Privacy Policy on our website. | | |
| Signed: | | Date: |
| We appreciate the time you have taken to provide us with this information. Thank you.  Please return your completed Application Form to: info@atthebus.org.uk | | |