**APPLICATION FORM**

De Morgan House, 57-58 Russell Square, London WC1B 4HS
Tel: 020 7637 3686 Fax: 020 7323 3655 E-mail: india.sivyer@lms.ac.uk

All candidates should complete this form in full. A curriculum vitae may be attached in addition to, but not in place of, information requested on this form. All information given will be treated with the strictest confidence.

Please note that failure to disclose relevant details or deliberate attempt to falsify information may lead to dismissal.

When completed, this form should be returned to **India Sivyer** via email to india.sivyer@lms.ac.uk

***For Office Use:* POSITION APPLIED FOR:**

 Closing Date:

 Date Received:

**1. PERSONAL DETAILS**

|  |  |
| --- | --- |
| Surname: | Home Telephone: |
| Forenames: | Mobile Telephone: |
| Postal Address: | E-mail Address: |
| Please tell us how you became aware of the vacancy: |

**2. QUALIFICATIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Schools, College or****University attended****(after age 11)** | **Subject and name of course** | **Dates from and to** | **Qualifications gained and year obtained** |
|  |  |  |  |

**4. PRESENT STUDIES**

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| **Please give details of any current studies, courses or training** |
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**4. PROFESSIONAL AND OTHER COURSES AND TRAINING**

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| --- | --- |
| **Dates** | **Details** |
|  |  |

**5. MEMBERSHIP OF PROFESSIONAL BODIES**

|  |  |
| --- | --- |
| **Name of professional body** | **Grade Of Membership (Where appropriate)** |
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**6. SALARY EXPECTATION**

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**7. EMPLOYMENT HISTORY** (Please list chronologically, starting with current or last employer)

|  |  |  |  |
| --- | --- | --- | --- |
| **Name and Address of Employer and Nature of Business** | **Dates of employment** **From To** | **Job Title and****Job Function/ Responsibilities** | **Final Salary and Reason for Leaving** |
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**8. OTHER INFORMATION IN SUPPORT OF YOUR APPLICATION**

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**9. WHAT INTERESTS YOU ABOUT THIS POST?**

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**10. REFEREES**

Please list the details of two persons who are willing to provide references for you. They should be persons who know you (but who are not members of your family) and who are qualified to give an opinion about how you are suitable for the post. No approach will be made to your present employer without your agreement before an offer of employment is made.

|  |  |
| --- | --- |
| Name: | Name: |
| Address: | Address: |
| E-mail: | E-mail: |
| Telephone No.: | Telephone No.: |
| Relationship to you: | Relationship to you: |

**11. SPECIAL REQUIREMENTS**

Please tell us if there are any ‘reasonable adjustments’ we can make to assist you in your application or with our recruitment process.

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**12. ADDITIONAL INFORMATION**

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| **Do you have an entitlement to work in the UK?****(If offered a position you will be required to provide proof of identity and entitlement)** |
| If No, or you have only a limited entitlement, please give details: |
| **Have you ever been dismissed or asked to leave a job?** |
| If Yes, please give details: |
| **Have you been convicted of any criminal offences not yet spent under the Rehabilitation of Offences Act 1974, as amended?**  |
| If Yes, please specify the nature and date of the conviction(s) and the relevant sentence(s): |
| **Is there anything which you are aware of which may affect your ability to perform the duties of the post for which you are applying?** |
| If Yes, please give details: |
| **Do you require any help/adjustment for the interview e.g. use of sign language?** |  |
|  |
| **Approximately how many days were you absent from work through sickness in the last year?** Please give details. (Successful candidates will be asked to complete a medical questionnaire and may be required to attend for medical examination if deemed necessary. A disability or health problem does not preclude consideration for employment and applications from suitably qualified disabled persons are welcome.) |  |
|  |

**13. VERIFICATION OF INFORMATION**

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| --- |
| I declare that all information which I have provided is correct. I understand that any false information given may result in a job offer being withdrawn or my employment terminated.Signature: Date: |

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