



EMPLOYMENT APPLICATION

MBSE Form HR195 V1.4 4.22

PLEASE COMPLETE ALL RELEVANT SECTIONS OF THIS FORM

Please complete all relevant sections of this form even if you are submitting a current CV with your application. Any additional information you wish to submit (certificates etc.) must be a copy and not the original document.

POSITION APPLIED FOR

HAVE YOU BEEN REFERRED FOR THIS VACANCY BY A CURRENT EMPLOYEE OF MBSE, IF SO PLEASE STATE FULL NAME HERE

DATE OF APPLICATION

HOW DID YOU LEARN ABOUT MBSE NEWS/WEB/WORD OF MOUTH etc.

Personal Details

FULL NAME AS IT APPEARS ON YOUR BIRTH CERTIFICATE

TITLE MR/MRS/MISS/DR etc

ADDRESS INCLUDING POSTCODE

CONTACT NUMBER

EMAIL ADDRESS

CURRENT SALARY £GBP

SALARY SOUGHT £GBP

DO YOU HAVE CURRENT VALID PERMISSION TO RESIDE AND WORK IN THE UNITED KINGDOM? Please tick

YES

NO

IF 'NO' PLEASE ATTACH FULL CITIZENSHIP DETAILS ON A SEPARATE SHEET

QUALIFICATIONS

PLEASE PROVIDE DETAILS OF ANY ACADEMIC OR PROFESSIONAL QUALIFICATIONS YOU HOLD, PARTICULARLY THOSE WHICH YOU FEEL ARE RELEVANT TO THE POSITION YOU ARE APPLYING FOR. THIS CAN INCLUDE MANUAL HANDLING, FIRST AID etc. WHERE RELEVANT, PLEASE ALSO INCLUDE COPIES OF CERTIFICATES RECEIVED.

HOBBIES AND PASTIMES

Employment History Please provide details of your current employers.

EMPLOYER/COMPANY NAME PLEASE PRINT

POSITION HELD

COMPANY ADDRESS INCLUDING POSTCODE

REPORTED TO

DURATION OF EMPLOYMENT DATE FROM - TO

DUTIES/RESPONSIBILITIES

STARTING SALARY £GBP

FINISHING SALARY £GBP

REASON FOR LEAVING

MAY WE CONTACT THE ABOVE TO OBTAIN A REFERENCE?

YES

NO

IF CURRENTLY EMPLOYED, DO YOU HAVE TO WORK A NOTICE PERIOD PLEASE PROVIDE DETAILS

YES

NO

CV ATTACHED? PLEASE INCLUDE WHERE POSSIBLE

YES

NO

General Information Please provide any additional information which you feel is relevant to your application

DO YOU SUFFER FROM ANY MEDICAL CONDITION OR HAVE ANY DISABILITY WHICH MAY REQUIRE THE COMPANY TO MAKE ADJUSTMENTS TO ENABLE YOU TO ATTEND AN INTERVIEW? (eg: epilepsy, asthma, back problems)

YES

NO

IF 'YES' PLEASE PROVIDE FULL DETAILS BELOW

DO YOU HAVE ANY CONVICTIONS, CAUTIONS, REPRIMANDS OR FINAL WARNINGS THAT ARE NOT 'PROTECTED' AS DEFINED BY THE REHABILITATION OF OFFENDERS ACT 1974 (EXCEPTIONS) ORDER 1975 (AS AMENDED 2013)?

YES

NO

IF 'YES' PLEASE PROVIDE FULL DETAILS BELOW

PLEASE ENSURE THAT ALL RELEVANT SECTIONS ARE COMPLETED, EVEN IF YOU ARE ENCLOSING A CV. INCORRECTLY COMPLETED OR INCOMPLETE FORMS WILL NOT BE ACCEPTED.

Declaration

By signing and dating this Declaration and submitting this completed form, 'Form HR195 Issue V1.3 1.22 Employment Application', to MBSE ('the Company'):

1. I authorise the Company to seek references from my current and former employers once an offer of employment has been made. We reserve the right to withdraw our offer to you or terminate employment without notice should your references not be satisfactory.

2. Any offer of employment is conditional upon you providing documents to confirm your right to work in the United Kingdom. We reserve the right to withdraw our offer to you or terminate employment without notice should you be unable to provide these documents.

I hereby certify that the information provided by me is accurate and true and in the event that it is not, the Company may not proceed with my application or may withdraw any offer or terminate my employment without notice.

I authorise the Company to process personal data about me for legal, personnel, administrative and management purposes

Any offer of employment is conditional upon the Company receiving a Standard Disclosure and Barring (DBS) check and health screening which it regards as satisfactory. We reserve the right to withdraw our offer to you or terminate employment without notice should the results not be satisfactory.

SIGNED

DATE