

Connexions

Providing Community Transport across Gloucestershire

APPLICATION FOR EMPLOYMENT - CONFIDENTIAL

llowed.	le any application from the shortlisting ex	ercise when the instructions o	outlined on this form have no
isa Stearns, Community C . PERSONAL DETAILS	I monitoring information to: connexions, Sandford Park Offices, Colleg	e Road, Cheltenham, GL51 3H2	X
Surname	Forenames	Title	(Mr/Mrs/Miss/Ms/Other)
Address		Telephone No. (Evening)	
		Telephone No. (Day)	
		Mobile	
Post Code		National Insurance No.	
Email			
	ents to assist you if called for interview?	☐ Yes ☐ No	

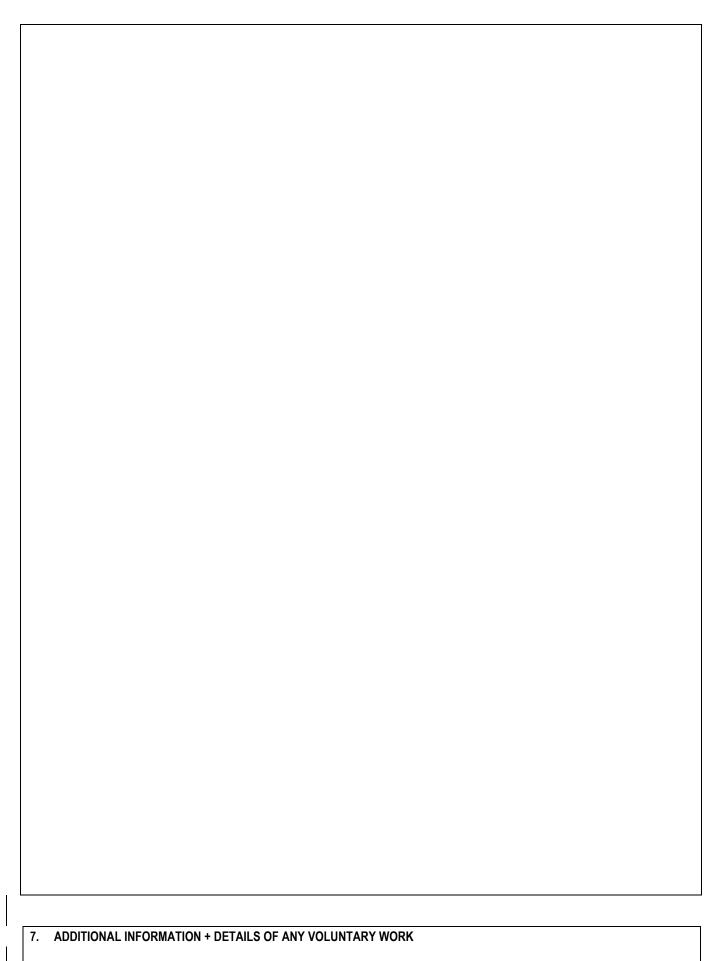
3. EDUCATION AND QUALIFICATION		ations abdatus 4 - 1.95 f		and and the section of	
necess	ary)	ations obtained while in sec	condary	education (continue	on a separate page if
Type of examination eg GCI etc.	E, GCSE	Subject			Result/Grades
Further and Higher Education	Please list below any	qualifications obtained whil	lst in fu	rther or higher educa	ation
Educational Establishment		Title of Qualification eg BTEC, BSc Econ, etc	Main	Subjects	Result/Grades
			•		<u>'</u>
PROFESSIONAL QUALIFIC Please list below any professional			nfaccio	nal hodies	
Organisation		mination, Date and Result			rship and Joining Date
Organisation	THE OF LAC	mination, Date and Nesuli		Type of menibe	- Tomp and Johning Date

5. EMPLOYMENT HISTORY

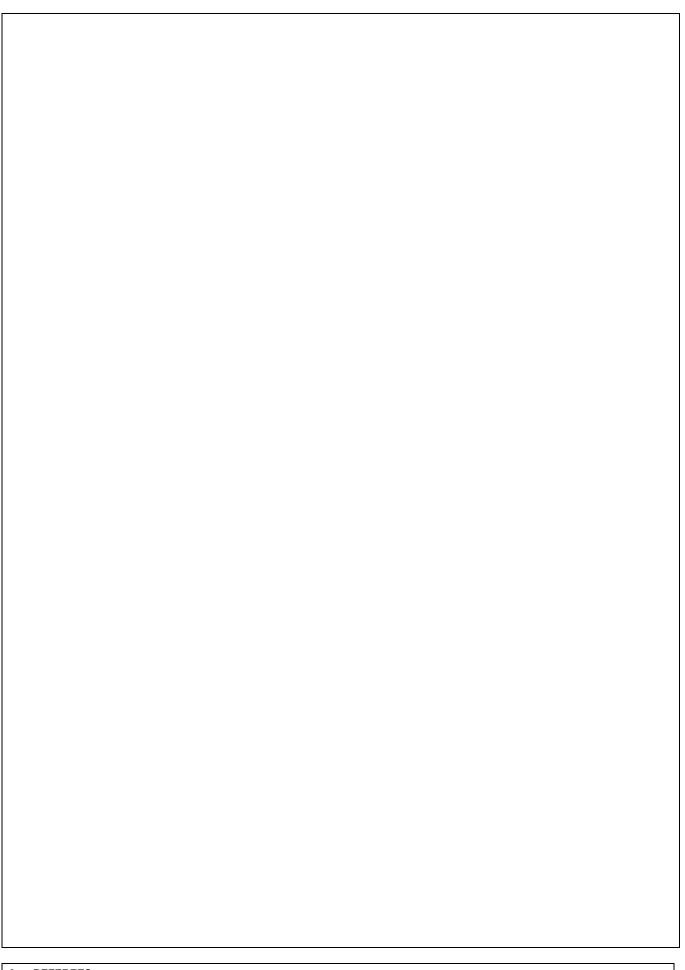
Please give details of the posts you have held starting with your present or more recent employer (continue on a separate page if necessary).

Employer Name, Date(s) Address and Nature of Job Title, Duties, Responsibilities and Reas		Job Title, Duties, Responsibilities and Reason for Leaving	
Address, and Nature of Business	From	То	If your job was part-time, please indicate.
			Commission/Bonus/
ings per annum for last/mos	st recent emplo	oyment £	Other Benefits etc.

Period of notice required	
6. RELEVANT TRAINING	
Please give below any relevant training which you have received.	



Please give below any particular skills which you would bring to the post and any other information relevant to your application (continue on a separate page if necessary).



8. REFEREES

Please give details of two referees, not related to you, one of which should be your current (or most recent) employer. Referees will not be contacted until the interview process is complete.

Name:	Name:
Address:	Address:
Phone No:	Phone No:
Relationship:	Relationship:
10_DECLARAT	TION
misrepresentat	n given by me on this application is, to the best of my knowledge and belief, true and correct. I also understand that any ion by me will lead to the withdrawal of any offer of employment or my employment being terminated without any bility on the part of the Committee other than for services rendered.
Signed:	Date:



Equal Opportunities Monitoring Form

Community Connexions accepts its responsibility as an equal opportunity employer in the adoption of an equal opportunity policy. If returning with an application form you should place it in a separate envelope, this will ensure that your details are kept separate from your application. At no stage will these details be seen by the selection/interviewing panel. The information you provide will only be used to help us monitor our effectiveness in implementing equal opportunities.

our en	ectiveness in implementing equal opportunities.
Post (a	applied for):
How d	id you learn of this vacancy?
How w	ould you describe your ethnic origin? Please circle the appropriate answer listed from A-F:
Α	White British English Scottish Welsh Irish Any other white background please specify
В	Mixed White and Black Caribbean White and Black African White and Asian Any other mixed background please specify
С	Asian, Asian British, Asian English, Asian Scottish, or Asian Indian Pakistani Bangladeshi Any other Asian background please specify
D	Black, Black British, Black English, Black Scottish, or Black Welsh Caribbean African Any other Black background please specify
E	Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Chinese Any other background
F	Any other ethnic group please specify
(Pleas	se note that the above classifications are those recommended by the Commission for Racial Equality)
Gende	er:
Male	Female Transgender
Sexua	l Orientation:
Straigh	nt Gay Bisexual
Do you Yes	u consider yourself to have any disabilities? No

Age Group: Under 25

25-34

35-44

45-54

Over 54