



EMPLOYMENT APPLICATION

Please complete this application form legibly and return to success@wings-crs.org. Only information provided on this application form will be considered by the panel. Candidates must outline clearly how their qualifications and experience meet both the essential and desirable criteria. All information provided will be treated with the strictest confidence. Continuation sheets may be added if necessary.

Please complete all sections of this application form.

Position Applied For:	
Job Reference (if applicable):	
Location:-	
Where did you see this position advertised?	

1. Personal Details

Title:	Surname:		
Forenames:			
Address:			
Postcode:			
Telephone Number (Home):		Telephone number (Mobile):	
E-mail address:			

2. Secondary Education

Name and address of School	Qualifications Gained (Specify Grades)	Dates from- to (dd/mm/yy- dd/mm/yy)

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3. Further and Higher Education

<i>Name of Institution</i>	<i>Qualifications Gained (Specify Grades/ Degree Class)</i>	<i>Dates from- to (dd/mm/yy- dd/mm/yy)</i>

4. Membership of Professional Organisations

<i>Institute/Organisation</i>	<i>Grade Of Membership (where appropriate)</i>	<i>Dates from- to (dd/mm/yy- dd/mm/yy)</i>

5. Employment Record (Please list chronologically, starting with current or most recent employer)

<i>Name and Address of Employer</i>	<i>Dates Employed (From / To)</i>	<i>Job Title and Outline of Responsibilities</i>	<i>Final Salary and Reason for Leaving</i>



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Name and Address of Employer	Dates Employed (From / To)	Job Title and Outline of Responsibilities	Final Salary and Reason for Leaving

Please use additional sheet if required

6. Periods of Unemployment *(Please provide details for any gaps in your employment dates)*

From	To	Details



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7. Training

Details of completed training courses which are relevant to the role (including dates where possible)

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8. Suitability for this Position

Please detail your suitability for this position. You should illustrate how you meet the essential and desirable criteria.

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Please use continuation sheets if necessary.

9. Referrals

Please give the details of two work related referees, including your current or most recent post. Referees may be contacted before interview. Please state if you do not wish for us to contact before interview.

Name:	Name:
Position:	Position:
Company:	Company:
Postal Address:	Postal Address:
Telephone No.:	Telephone No.:
Email Address:	Email Address:
Nature of Relationship:	Nature of Relationship:



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<p>Do you have the right to work in this country?</p> <p>Note: Wings CRS will require proof of this right before an offer of employment can be confirmed – e.g. Birth certificate and/or any other appropriate document required to confirm your right to work in the U.S or other nation you are being hired for as required by law.</p>	<p>Yes No</p>
<p>Are you competent in spoken and written English?</p> <p>What other languages are you fluent in?</p>	<p>Yes No</p>
<p>Last 4 digits of your social security number</p>	
<p>Do you have a clean, current driving license?</p>	<p>Yes No</p>
<p>Do you have a car or access to a car for business use?</p>	<p>Yes No</p>
<p>Are you prepared to undergo a medical examination?</p>	<p>Yes No</p>
<p>Have you ever been convicted of a criminal offense?</p> <p><i>(If yes, please give details, please include any spent convictions, cautions and warnings).</i></p> <p>Wings CRS has a policy on the employment of ex-offenders and the receipt, storage and security of disclosures, these are available upon request.</p>	<p>Yes No</p>
<p>Is there any reason why you cannot work in regulated activity?</p> <p>Date asked _____</p> <p>Applicants response _____</p>	<p>Yes No</p>
<p>Are you a military veteran? (yes or no)</p>	
<p>If yes, in what branch and for how long (years)</p>	
<p>What rank did you obtain from leaving the service.</p>	

10. Verification of Information

<p><i>I certify that all information which I have provided is correct. I understand that any false information given or deliberate omissions may result in a job offer being withdrawn or dismissal from any position I may be offered.</i></p>	
<p>Signature: _____</p>	<p>Date: _____</p>



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For office use only:

Application Number:		Interview Date:	
Date referees sent:		Date Referees returned:	
Temp/Perm/Relief		Day/Night	

This sheet will be separated from your application form upon receipt and does not form part of the selection process. It will be retained by the Talent & Culture Success team purely for monitoring purposes.

Application Ref. No.:

Section 12 Recruitment Monitoring Form

Application for the post of:

To help us ensure that our Equal Opportunities Policy is fully and fairly implemented please COMPLETE THIS SECTION OF THE APPLICATION FORM.

Disability

Disability is defined as “physical or mental impairment, which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities”.

Do you consider yourself disabled?

Yes No

If yes, please give details:

Media

Please state where you saw this post advertised



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Introduction:

We are an Equal Opportunities Employer. We do not discriminate against our job applicants or employees and we aim to select the best person for the job.

We monitor the community background and sex of our job applicants and employees in order to demonstrate our commitment to promoting equality of opportunity in employment and to comply with our duties under the *EEO act*.

You are not obliged to answer the questions on this form and you will not suffer any penalty if you choose not to do so. Nevertheless, we encourage you to answer these questions. Your answers will be used by us to prepare and submit a monitoring return to the Equality Commission, but your identity will be kept anonymous. In all other regards your answers will be treated with the strictest confidence. We assure you that your answers will not be used by us to make any decisions affecting you, whether in a recruitment exercise or during any employment with us.

Please return your application to success@wings-crs.org. Thank you for applying.