

STANDARD APPLICATION FORM

VACANCY DETAILS			
Job Title:	Museum Assistant - Administration	How did you hear about this vacancy	
PERSONAL DETAILS			
Surname:		Forenames:	
Previous surname:		Preferred forename:	
Address:		Title – Mr/Mrs/Miss/Ms/Dr:	
		Work phone no.	
		Home phone no.	
		Mobile phone no.	
Postcode:		Email:	
NATIONAL INSURANCE NUMBER			
ELIGIBILITY TO WORK IN THE UK			
Do you have permission to work in the UK?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If no, please give details:			

CURRENT/MOST RECENT EMPLOYMENT			
Employer's name and address		Your job title:	
		Current salary:	
		Date appointed:	
		Notice period:	
Main duties:			
Reason for leaving:			
May we contact you at work if necessary	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

EMPLOYMENT HISTORY

PREVIOUS EMPLOYMENT HISTORY (most recent first)

We reserve the right to obtain references or to contact previous employers in addition to your named referees.

Please note: for posts within children and young people services or adult regulated services, please explain any gaps in your employment history.

Employer's name and address, telephone number and email	Job title and brief description of duties	Date from/to DD/MM/YY	Reason for leaving

Please continue on a separate sheet if required

REFERENCES

Referees named on this form must be your current (most recent) and previous employer. If you have not previously been employed, or are returning to work after a substantial career break and are unable to provide previous employment references, please provide alternatives, e.g. the name of your course Tutor(s) / Head Teacher or a suitable professional. We may contact **referees prior to interview**. **If you do not wish us to contact the referee before interview please enter 'x' in the box.**

CURRENT (MOST RECENT) EMPLOYER <input type="checkbox"/>	PREVIOUS EMPLOYER <input type="checkbox"/>
Name (title, forename, surname)	Name (title, forename, surname)
Capacity known to you	Capacity known to you
Organisation	Organisation
Email:	Email:
Telephone Number:	Telephone Number:
Address:	Address:

SUPPORTING STATEMENT

The information you provide in this section will be used in assessing your application and will determine whether you are shortlisted for interview or not. Please use this space to state how your skills, experience and training would enable you to meet the requirements of the job for which you are applying. Please refer to the criteria outlined in the person specification and respond in the order that each criteria point appears.

EDUCATION/TRAINING

QUALIFICATIONS & PROFESSIONAL MEMBERSHIPS

Qualification and professional memberships obtained	
Dates	Other training / short courses

Please continue on a separate sheet if required

<p>Are you related to a Trustee or Senior member of staff? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'yes' please provide Name: _____ Relationship: _____</p> <p>All forms of canvassing will automatically disqualify candidates from appointment, e.g. you must not ask a Trustee or member of staff to use their influence to help you get a job.</p>
<p>If selected for interview, you must, at that stage, make known any personal or business relationship, which may conflict with the role applied for.</p>
<p>If you are selected for interview, we would prefer to contact you by email. Please select: email <input type="checkbox"/> letter <input type="checkbox"/></p>

DATA PROTECTION LEGISLATION



The information you have provided will be held in compliance with the Data Protection Act 2018.

We may additionally ask you to complete a Health Check if you are offered the post.

DECLARATION

I declare that the information I have provided on this application form is full, accurate and complete and I understand that if I provide false information, or fail to provide full, complete and accurate information, this may lead to the decision that my application cannot be considered any further, the withdrawal of the offer of appointment, or to my dismissal, if I have been appointed. Any offer of employment is subject to receipt of satisfactory completion of recruitment checks applicable to the post.

Signature: _____

Date: _____

CONFIDENTIAL

EQUAL OPPORTUNITIES MONITORING INFORMATION

Wiltshire Museum will seek to ensure that all existing and potential employees are given equal opportunities. We are committed to the elimination of unlawful or unfair discrimination and will seek to ensure that no applicant for employment is disadvantaged by conditions or requirements which cannot be justified.

In order to help the Wiltshire Museum monitor the effectiveness of its Equal Opportunities Policy you are asked to provide the information requested below. This information is confidential and does not form part of your application. **This information will be detached from your application form upon receipt and the information will not be taken into account when making the appointment**

If you are successful at interview and take up employment with the Wiltshire Museum the equal opportunities information you have provided will form part of your employment record and will be held and maintained in accordance with the Data Protection Act 1998.

Name: _____

Post: _____

Date of Birth: _____

GENDER

Male Non-Binary
Female Prefer not to say

DISABILITY

Do you consider yourself to have a disability under the Equality Act 2010? A disability is defined as a 'physical or mental impairment which has substantial and long term adverse effects on the ability to carry out normal day to day activities'.

Yes No Prefer not to say

For more details, please contact the Equal Rights Commission Helpline on 0845 604 6610

NATIONALITY: _____

ETHNIC ORIGIN

White

British
Irish
Gypsy or Irish Traveller
Any other White background

Mixed

White and Black Caribbean

- White and Black African
- White and Asian
- Any other Mixed background

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background

Black or Black British

- Caribbean
- African
- Any other Black background

Other

- Arab
- Any other ethnic group
- Prefer not to say

SEXUAL ORIENTATION

- Heterosexual
- Bisexual
- Gay Man
- Gay Woman/Lesbian
- Prefer not to say