



**Application form for:** \_\_\_\_\_

Surname(Block Capitals):		Title:
Forename(s):		
Permanent Address:		
Telephone Number - Home:		Work:
Email Address:		Fax Number:

Current Employment	
Job Title:	
Current Employer:	
Salary:	
What period of notice are you required to give to your present employer?	

Secondary Education		
Name of School	Dates	Details of Subjects/Exam Results

Further Education		
Name of College/University	Dates	Details of Qualifications/Exam Results

**Employment History**

*Starting with your present employer, please list what you have done in the course of your career, i.e. in reverse chronological order.*

<b>Dates</b>		<b>Employer</b>	<b>Position Held</b>	<b>Reason for leaving</b>	<b>Salary on leaving</b>
<b>From</b>	<b>To</b>				

Brief description of responsibilities/duties:

<b>Dates</b>		<b>Employer</b>	<b>Position Held</b>	<b>Reason for leaving</b>	<b>Salary on leaving</b>
<b>From</b>	<b>To</b>				

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<b>From</b>	<b>To</b>				

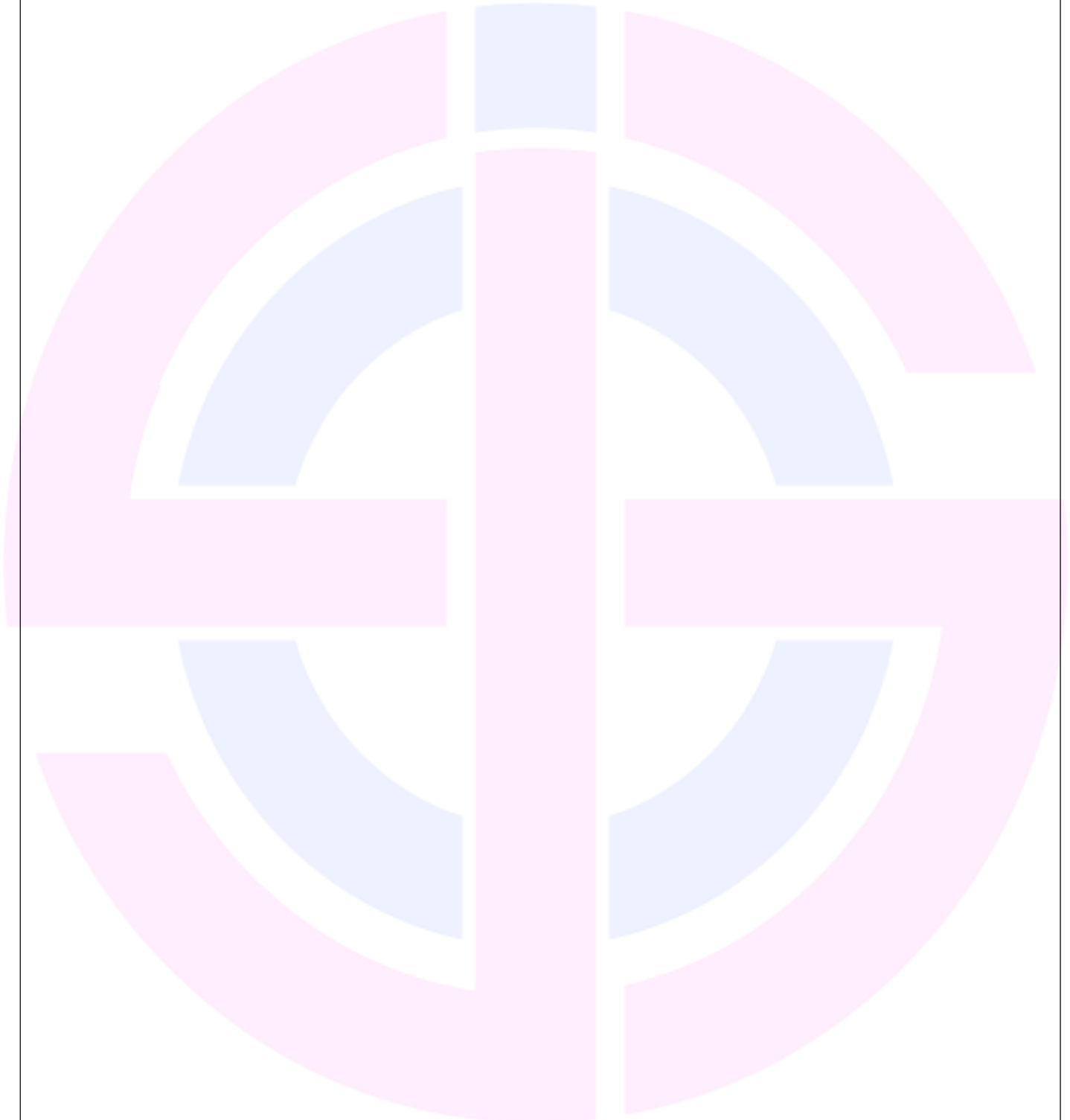
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<b>From</b>	<b>To</b>				

Brief description of responsibilities/duties:

**Relevant employment, experience, skills and other information:**

The information you provide here is important for assessing your application. Please use the space below and additional sheets, if necessary, to state your reasons for applying for the post and relating your skills, experience and personal qualities to the requirements of the job description and person specification. Where they are relevant, you should include details of paid employment, unpaid work experience, voluntary/community work and leisure interests.



**References:**  
Please provide the names and addresses of **three** persons, including your present employer, to whom reference can be made (please obtain permission). Friends and family are not acceptable.

May we approach your current employer now: *(please delete as appropriate)* YES/NO

<b>Name:</b>	
<b>Address:</b>	
<b>Telephone Number:</b>	
<b>Occupation</b>	
<b>Name:</b>	
<b>Address:</b>	
<b>Telephone Number:</b>	
<b>Occupation</b>	
<b>Name:</b>	
<b>Address:</b>	
<b>Telephone Number:</b>	
<b>Occupation</b>	

**Medical History:**  
Please disclose any aspect of your medical history which may be relevant to this appointment.

Have you been absent from work, through illness, for more than 3 days in the last 12 months?  
YES/NO

**Criminal Convictions:**  
Have you any unspent criminal convictions? YES/NO. If "Yes", please give details.

**Declaration:** I confirm that to the best of my knowledge and belief, the information given is complete and correct.

Signature: ..... Date: .....

Please return this form email to [info@sjoaccountants.co.uk](mailto:info@sjoaccountants.co.uk)