**APPLICATION FOR EMPLOYMENT**

**All applicants are asked to complete and return the College application form. Completed applications should be emailed to:** [**jobvacancies@trin.cam.ac.uk**](mailto:jobvacancies@trin.cam.ac.uk) **You must complete all sections of this application.**

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| **PERSONAL DETAILS** | | |
| SURNAME: |  | |
| OTHER NAMES: |  | |
| PREFERED TITLE: |  | |
| TELEPHONE : |  | |
| EMAIL ADDRESS: |  | |
| CURRENT ADDRESS: |  | |
| **PRESENT EMPLOYMENT** | | |
| EMPLOYER: |  | |
| ADDRESS: |  | |
| DATE OF EMPLOYMENT | START: | END: |
| JOB TITLE: |  | |
| SALARY (£): |  | |
| BRIEF DESCRIPTION OF ROLE AND RESPONSIBILITIES: |  | |
| REASON FOR LEAVING: |  | |

**POST APPLIED FOR:**

|  |  |  |
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| **EDUCATION AND QUALIFICATIONS**  (most recent qualification first, including any current courses with expected dates of completion) | | |
| **INSTITUTION** | **QUALIFICATIONS AND GRADES OBTAINED** | **DATE GAINED** |
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| **Please give information of any courses undertaken, personal development, membership of associations or professional bodies, including details of membership and membership number if applicable.** | | |
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| **GENERAL** | |
| Are there any restrictions on your continued residence or employment in the UK? | **Yes**  **No** (if yes, please provide details in the space below) |
| If ‘yes’ and you are successful in your application, do you already have permission to seek new employment in the UK? | **Yes  No** |
| If appointed how soon would you be able to commence your role? |  |

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| --- | --- | --- | --- | --- | --- |
| **EMPLOYMENT HISTORY / WORK EXPERIENCE**  (MOST RECENT APPOINTMENT FIRST) | | | | | |
| **EMPLOYER** | **JOB TITLE** | **START DATE** | **END DATE** | **BRIEF DESCRIPTION OF RESPONSIBILITIES** | **REASON FOR LEAVING** |
|  |  |  |  |  |  |

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| **SUITABILITY FOR THE ROLE** |
| Please give details of why you have applied for this role and provide specific examples of how you meet the requirements of this role set out in the further particulars. |
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| **REFEREES** | |
| Please give the names and addresses of two referees who have given permission for their names to be used. They should be responsible persons able to speak from their recent first-hand knowledge of your suitability for the post. One at least should be able to report on your work in your present post or occupation. | |
|  | |
| 1) NAME |  |
| ADDRESS |  |
| RELATIONSHIP/POSITION |  |
| E-MAIL |  |
| PHONE NUMBER |  |
|  | |
| 2) NAME |  |
| ADDRESS |  |
| RELATIONSHIP/POSITION |  |
| E-MAIL |  |
| PHONE NUMBER |  |
| Do you object to a reference being requested from your present employer? **Yes  No** | |

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| **Data Protection and Applicant Declaration:**  Any processing of personal data by the College will be in accordance with the principles set out in the Data Protection Act 2018. If you are successful we will keep your application form. If you are unsuccessful we will destroy it within 6 months of the date of appointment.     * I give my consent to Trinity College processing the data supplied in this form for the purpose of recruitment and equal opportunities monitoring. * I confirm that the information that I have given in this application is correct and complete. * I confirm that the information that I have given in this application for employment form is correct and complete. I understand that failure to disclose any relevant information or the provision of false information may lead to dismissal or withdrawal of any offer of employment made to me.   **Signed: Dated:** |