



Careers Application Form

All job applications received at Wildbore Vetstop will be treated fairly and equally. Selection for employment, promotion and training is highly competitive and will be based upon aptitude and ability, with short-listed candidates being invited for interview(s). Please provide a supporting letter/CV alongside your application form. Submitted CV's can only be accepted with a fully completed application form for the job role advertised and must not show your date of birth.

Please ensure you complete this application form using **BLACK INK** only! You may continue on blank paper (or the back page) if you wish. Once completed, please return to the appropriate line manager as stated in the job advert. We look forward to receiving your application.

Please outline which of our currently advertised role(s) you wish to apply for:

- | | | | |
|-------------------------------|--------------------------|-----------------------------|--------------------------|
| ➤ Front of House member | <input type="checkbox"/> | ➤ Student Veterinary Nurse | <input type="checkbox"/> |
| ➤ Veterinary Surgeon | <input type="checkbox"/> | ➤ Veterinary Care Assistant | <input type="checkbox"/> |
| ➤ Registered Veterinary Nurse | <input type="checkbox"/> | ➤ Other: | |

Personal details

Forename(s): Surname:

Address:

..... Postcode:

Tel no (home): Tel no (mobile):

Email address: National Insurance no:

How far do you live from the premises?.....

How would you get to and from work?.....

Do you hold a full clean driving license? Yes / No (please circle as appropriate)

Do you require a work permit? Yes / No (please circle as appropriate)

If so, when does your current permit expire?.....

Have you worked for us before? Yes / No (please circle as appropriate)

If yes, what was your reason for leaving:

.....
.....

Your availability:

Please specify any dates that you would not be available for interview:

.....

Please give the date that you would be available to start work and any period of notice required:

.....

What form of employment are you looking for? Full Time / Part Time (please circle as appropriate)

As we are a 24 hour veterinary hospital, how flexible are you for shift work?:

.....

Could you work extra hours if required?: Yes / No (please circle as appropriate)

What commitments do you have outside of work?:

.....

Present & previous employment:

(please include any work experience details)

<u>Employment/Work Experience Dates</u>	<u>Name, Full Address & Contact No. of employer</u>	<u>Job title & main duties</u>	<u>Reason(s) for leaving</u>



Secondary Education:

Name of Secondary School:

Years of Study:

<u>Qualification Subject(s)</u>	<u>Grades/Awards achieved</u> (inc. attainment date)

Higher Education:

Name of College/University:

Years of Study:

<u>Qualification Subject(s)</u>	<u>Grades/Awards achieved</u> (inc. attainment date)

Professional Development/Memberships:

Please tell us below of any further professional development you may have or are currently undertaking:

.....
.....

Please tell us of any memberships you hold for professional bodies:

.....
.....



Information in support of your application:

Please use this section to demonstrate why you think you would be suitable for this post including all relevant skills, interests and experiences which relate to the job description. You may include examples/case studies of this information, whether obtained through formal employment or voluntary/leisure activities).

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

What else should we know about you?

What do you do in your spare time?

.....

.....

.....

.....

What would you describe as your proudest achievement to date?

.....

.....

.....

.....

How does this position fit in with your long-term career goals?

.....

.....

.....

.....



Disability Requirements

So that we can treat all applicants fairly, do you consider yourself to have a disability that is relevant to the job for which you are applying? Yes / No (please circle as appropriate)

If yes please give brief details of the effects of the disability and any assistance you would need:

a) To attend interview

.....
.....

b) To enable you to perform the job, if successful

.....
.....

Criminal Convictions History

Have you ever been convicted of a criminal offence or are there any charges outstanding? **Yes / No**

If "Yes" please give details (under the Rehabilitation of Offenders Act 1974, spent convictions need not be declared)

.....
.....

References:

Please give details of your two most recent employers. References will be requested following a verbal offer. We will not approach your current employer without your permission.

(If you have no previous employment please give details of who to contact for a personal or educational reference)

Name:

Name:

Job title:

Job Title:

Address:

Address:

.....

.....

.....

.....

Tel no:

Tel no:

Email:

Email:

Capacity in which known to you?:

Capacity in which known to you?:

.....

.....

How did you hear about this current vacancy?

.....
.....

Declaration and Consent of Personal Data

The contents of this form are confidential. If you are successful it will form the basis of your records held by the Company.

I consent to the company recording my data and disclosing information contained on this form to third parties in order to process this application, any subsequent employment and any matter relating to that employment. I also consent to the company contacting my present and/or previous employer or work experience provider for a reference as listed above.

I declare that the information given on this form is true and complete to the best of my knowledge and belief. I understand that if I am subsequently appointed, any of the following will render me liable to disciplinary action which may include dismissal; any false statement, failure to disclose medical information or failure to disclose any criminal convictions where required to do so.

I further understand that it is my responsibility to ensure that I hold the relevant professional qualifications and permits.

Signed..... Date.....

Print name.....

Thank you

