

APPLICATION FOR EMPLOYMENT

To aid photocopying of your application, please complete in black ink or typescript.

If you require acknowledgement of receipt of this form please provide a stamped addressed envelope. A list of candidates to be invited to interview will be drawn up on the basis of information given on this Application Form along with any other supporting documentation provided by the candidate.

It is **tic** policy to retain your completed application form for 6 months after the interview date. During this time your details may be put forward for other relevant vacancies unless specific instruction is received from you not to do so.

EQUAL OPPORTUNITIES POLICY

Technology Innovation Centre is committed to an equal opportunities policy in employment and will assess applicants for jobs without regard to age, sex, sexual orientation, marital status, religion, race, ethnic origin, colour or disability.

Post applied for:
Ref. No:
Closing Date:
Division/Unit:
Where did you see the advert?

PERSONAL DETAILS (BLOCK CAPITALS)

The successful candidate will be required to verify their identity on their first day of work.

First Name(s):	Known as:	Surname:
Preferred Title: (Please circle) Dr / Mr / Mrs / Miss / Ms		Telephone:
Permanent Address:		Daytime:
		Home:
		Mobile:
Post Code:		Email :
Contact Address (if different from above):		Please indicate convenient times for us to contact you. Discretion will be used when contacting you at work.

PRESENT APPOINTMENT

Date of Appointment	Employer's Name and Address	Post Held & Key Responsibilities	Salary
			Present Basic Salary: £ Other Benefits:

ALL PREVIOUS EMPLOYMENT

Please place in chronological order (earliest first) all work experience including full-time, part-time or voluntary work. Please continue on a separate sheet if necessary.

From DD MM YY	To DD MM YY	Employer	Post Held	Salary on leaving	Reason for leaving

EDUCATION AND TRAINING

Place in chronological order (earliest first) all full-time and part-time studies undertaken since leaving primary school. For verification purposes, the appointee will be required to present original certification of any qualifications listed on their first day of work.

Dates Attended	Full-Time or Part-Time	Secondary School/College/ University etc	Qualifications/Examinations attained. Please also state subject.	Level/Grade	Date Gained

MEMBERSHIP OF PROFESSIONAL BODIES

Name of Professional Body	Present Grade of Membership	Was Entry Obtained through Examination?	If yes, state final examination year
Professional Society Activities:			

DETAILS OF OTHER COURSES ATTENDED

Dates Attended		Course Title and Organising Body	Subjects	Length of course
From	To			



EXPERIENCE

Please provide details of your suitability for this role. Please give specific examples from your past experience, wherever possible relating these to the Job Information. If you are unemployed or have no work experience, please indicate the qualities/skills that you possess relevant to the job for which you have applied. Please continue on a separate sheet if necessary.

REFERENCES

Please provide details of two people to whom an approach may be made with reference to your work experience. One of these should be your present or most recent employer. Should any referees have known you at any time by any other name, please indicate that name. **If you do not wish a referee to be contacted at this stage, please indicate this by ticking the appropriate box below.**

Present Employer

Name:

Occupation:

Company:

Address:

Post Code :

Tel No:

I do not wish my referee to be contacted at this stage

Other Referee

Name:

Occupation:

Company:

Address:

Post Code:

Tel No:

REASON FOR APPLICATION

Please explain why you are interested in undertaking this particular role.

OTHER INFORMATION

If you are related to any employee of the Technology Innovation Centre please give details:

Name:

Relationship:

ELIGIBILITY FOR WORK IN THE UNITED KINGDOM

Please tick the box against the sentence which best describes your situation:

I would be able to take up this full-time post without the need for further immigration documentation (for example, I am a British National)

I would need further immigration documentation to take up this post (for example, I would need a Work Permit)

DECLARATION

I hereby certify that to the best of my knowledge, all the information contained in this application form and any additional sheets is correct and that all questions have been fully and accurately answered. If returning this form by email you will be asked to provide an original signature upon appointment.

I understand that canvassing staff of the Technology Innovation Centre will result in my application being disqualified.

Signed: _____

Date: _____

Please return to:

**HR Officer
Technology Innovation Centre
Millennium Point
Curzon Street
Birmingham B4 7XG**

With this application form the candidate should receive:

Job Information
Conditions of Employment
Diversity Questionnaire
Feedback Questionnaire