**Application Form**

The Kings Theatre is committed to providing an accessible recruitment process for all candidates, therefore if you have any additional requirements to complete your application form please contact the HR Team on recruitment@kingsportsmouth.co.uk or call 02392 852 215. (Large text and dyslexic text documents are available)

You should complete this form fully in black ink or typescript and return it to: HR, Kings Theatre Trust Ltd, Albert Road, Southsea, Hampshire PO5 2QJ. Please do not substitute a CV for this application form.

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| **Position Applied for:** |  |

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| **PERSONAL INFORMATION** |

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| --- | --- | --- | --- |
| Title: |  | Forenames: |  |
| Surname: |  | Surname at birth (if different): |  |
| Preferred Pronouns (Optional) |  |
| Permanent address:Post Code: | Address for letters (if different): Post Code: |
| Email Address: |  |
| Home/Work Telephone: |  | Mobile: |  |
| Do you hold a current driving licence? |  | Do you have access to a car? |  |

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| **REFEREES** |

Please give details of two referees, whom we can approach, should you be shortlisted. One of these must be your present or most recent employer. The other may provide a character reference and must not be a member of your family. Please note that referees will not be contacted without your permission. Any offer of employment will be subject to receipt of satisfactory references and may be withdrawn in the event of a failure to receive them or if they are deemed unacceptable for the post applied for.

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| Name: |  |
| Address: |  |
| Telephone: |  | Email |  |
| In what context does this referee know you? |

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Telephone: |  | Email |  |
| In what context does this referee know you? |
| **EDUCATIONAL QUALIFICATIONS** |

Please give details of schools, colleges or universities attended. (Please continue on a separate sheet if required)

|  |  |  |  |
| --- | --- | --- | --- |
| Name & Address of Institute | Dates | Subjects Taken | Level of Qualification |
| From | To |
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| **QUALIFICATION / TRAINING** |

Please provide details of any other training undertaken.

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| Qualification Achieved | Date Obtained |
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| **EMPLOYMENT INFORMATION** |

Please give details of all full-time and part-time work, including any periods of self-employment, within the last 10 years. (Please continue on a separate sheet if required)

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| --- | --- | --- | --- |
| Name & Address of Most Recent or Present Employer | Dates | Job Title, Nature of Work & Salary | Reason for Leaving / Notice Required |
| From | To |
|  |  |  |  |  |

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| --- | --- | --- | --- |
| Name & Address of Previous Employers | Dates | Job Title, Nature of Work & Salary | Reason for Leaving  |
| From | To |
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| Give details of any time not already accounted for (including unemployment) |

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| **OTHER INFORMATION** |

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| Please give details of any relevant skills, experiences or interests that you have which are not covered in the previous pages |

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| Do you have any criminal convictions that have not been spent under the Rehabilitation of Offenders Act 1974? | Yes | No |
| Have you been charged with any offence, which has not yet been brought to trial? | Yes | No |
| If you have answered ‘yes’ to either of the above, please provide details below. |

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| Please summarise in 100 words why you would like the position? |

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| **INTERVIEWS** |

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| Please indicate if there are any dates you would not be available for an interview |

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| **ADVERTISING & PUBLICITY** |

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| Please indicate how you heard about this vacancy |

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| **DECLARATION** |

I declare that the details given on this application are to the best of my knowledge and belief, true and complete. I understand that my application may be rejected or, if I am already appointed, I may be dismissed if I withhold relevant details or give false information.

I give permission for all or part of this application to be held on both computerised and manual records, which I may request access to.

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| --- | --- | --- | --- |
| Signed: |  | Date: |  |

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| **For office use only** |
| Application Reference |  | Initials |  |
| Received | Shortlisted | Interviewed | Offered Post |

**Recruitment Monitoring Form**

The Kings Theatre is committed to equal opportunities in employment, in order to ensure the effectiveness of this policy; all applicants are asked to provide the following information. The information you give will be treated in the strictest confidence and used for statistical purposes only, in the interests of equality and opportunity. The information given on this form will be entered into a computer and under the terms and conditions of the Data Protection Act 1998 will be treated in a secure and confidential manner.

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| **Position Applied for:** |  |

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| **Personal Information** |

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| Title: |  | Surname: |  |
| Forenames: |  |
| Date of Birth: |  |
| Gender: |  Male |  Female |

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| **Disability Information** |

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| Do you consider that you have a disability? If Yes people provide details |
| Are there any adjustments to the essential duties of this position that you think we could make in relation to a disability you may have? |
| If you have a disability registration number please enter it here: |

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| **Ethnic Origin** |

How would you describe your ethnic origin? (Please tick as appropriate)

|  |  |  |
| --- | --- | --- |
|  White – UK |  White - European |  White – Other (please specify) |
|  Black – Caribbean |  Black – African |  Black – Other (please specify) |
|  Indian |  Pakistani |  Bangladeshi |
|  Chinese |  Other (please specify) |

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| **Legal Right to Work in the UK** |

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| Place of birth: |  |
| Nationality:  |  |

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| Are you a British Citizen or an EC National? |  Yes |  No |

(If the answer is no, please answer the following questions)

|  |  |  |
| --- | --- | --- |
| Do you have evidence of entitlement to enter and work in the UK? |  Yes |  No |
| If yes, please confirm whether: |
|  Settled Status |  Spouse of British Citizen |  Other: |
| If no, please confirm your immigration status: |
|  Student |  Visitor |  Subject to Work Permit provisions |  Self employed |

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| --- | --- | --- |
| Is there a time limit placed on your stay in the UK? |  Yes |  No |
| If yes, please confirm expiry date: |

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I certify that the information I have given on this form is true and correct to the best of my knowledge and I understand that the giving of false or misleading statements or withholding material information may result in disciplinary action including dismissal.

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| Signed |  | Date |  |