

COLCHESTER ZOOLOGICAL SOCIETY EMPLOYMENT APPLICATION FORM

Return completed form by email to the contact named within the advertised vacancy.

SECTION ONE - Posit	tion Details (ty	ype in info	ormation)		
Position applied for	•				
Department:					
Previous employment at CZS: (Include job title, department and dates.)					
Are you eligible to work in the UK in accordance with the Immigration and Asylum Act 1999?					
(You must be able to pro evidence that you are en without the need for CZS work permit.)	ititled to work in th	ne UK			
National Insurance	number:				
SECTION TWO - App	olicant Details	(type in i	nformation)		
Title:					
Surname:					
First Name(s):					
Postcode:					
Telephone:					
Email Address:					
SECTION THREE - Qu	ualifications (t	type in inf	ormation)		
Qualification (Inc. g	jrade)	School /	University / Inst	itution	Date Achieved

Qualification (Inc. g	rade)	School / Univers	ity / Institution		Date Achieved
<u> </u>			ity į iliotitution		Date Admidted
SECTION FIVE - Mem	bership o	f Professional Body,	include any offices hel	d	
type in information					
Qualification (Inc. g	rade)	School / Univers	ity / Institution		Date Achieved
		1			
SECTION SIX - CURRI	ENT / MOS	T RECENT EMPLOYME	NT (type in information	n)	
Job Title:			Current Job:		
Employer:					
Start Date:			End Date:		
Salary:			LIIU DULE.		
Main duties					
main auties and responsibilities:	:				
•					
Notice Period:					

SECTION SEVEN - PREVI	OUS EMPLOYMENT: ((type in information)		
Job Title:		Current Jok) :	
Employer:				
Start Date:		End Date:		
Salary:				
Main duties and responsibilities:				
Notice Period:				
Reason for leaving:				
PREVIOUS EMPLOYMENT	CONTINUED (type	e in information)		1
Job Title:		Current Job):	
Employer:				
Start Date:		End Date:		
Salary:				
Main duties and responsibilities:				
Notice Period:				
Reason for leaving:				
PREVIOUS EMPLOYMENT				
Job Title	Employer	Start Date	Leave Date	Reason for leaving

GAPS IN EMPLOYMENT – please specify reasons and dates for any gaps in employment (type in information)			
SUPPORTING INFORMATION	ON - Please provide any in	formation in support of vo	our application.
This should provide us w	ith evidence of the skills, lout with the role for which	knowledge, personal attril	outes, competence
employer (i.e. you line m	e the details of two refered nanager or Head of Depart employment history (type	ment) References from fa	rent or most recent mily or friends are not
Title:		First Name:	
Can the reference be contacted?		Surname:	
Job Title:		T	
Address:			
Email:		Telephone:	
Relationship:	<u></u>		
Title:		First Name:	
Can the reference be contacted?		Surname:	
Job Title:			
Address:		Talambaras	
Email:		Telephone:	
Relationship:			

DISABILITY – Do you require any special arrangements to be made to participate in the selection process on account of a disability? If yes, please give brief details (type in information)			
	u ever been convicted of a criminal offence i.e. cautions, reprimands se give details of any unspent convictions.		
DECLARATION: Please rea	ad carefully before signing this application		
I confirm that the above is information will give my exthat the organisation reservequire further information the law requires us to information the law requires us to information the law requires that this is for up to six years thereafthe Data Protection Act. I to the Criminal Records B that should I fail to do so,	Information is complete and correct and that any untrue or misleading employer the right to terminate any employment contract offered. I agree erves the right to require me to undergo a medical examination. (Should we in and wish to contact your doctor with a view to obtaining a medical report, orm you of our intention and obtain your permission prior to contacting your information will be retained in my personnel file during my employment and ter and understand that information will be processed in accordance with agree that should I be successful with this application, I will, if required apply ureau/Scottish Criminal Records Office for a basic disclosure. I understand or should the disclosure not be to the satisfaction of the company, any offer vithdrawn or my employment terminated.		
Signed:			
Date:			