

#### The contents of this form will be treated as confidential

Trainee Business Support Professional	
	Trainee Business Support Professional

### **Personal Details**

Surname		Forenames		
Title	Address			
Post Code		Telephone Landline: Mobile:		
Do you have a current right to work in the UK		YES / NO (delete as appropriate)		
If no, please provide details:				
Email Address:				
National Insurance Number	:			
Do you have a current drivi	ng licence? YES / NO	(delete as appropriate)		
Driving Licence, No:				
If there any endorsements of	on your driving licence	, please give details below:		

### **Education History**

School / College / University attended (From – To)	Qualifications/Grade Gained



## **Current Employment**

Length of Employment	Name & address of Employer	Job Title	Responsibilities/ Duties	Current Salary/ Salary Expecta tion	Reason for Leaving

## **Previous Employment History**

Length of	Name &		Responsibilities/		Reason for		
Employment (from – to)	address of	Job Title	Duties	Salary	Leaving		
(from – to)	Employer						
Please note her	e any other emp	oyment that yo	ou would continue with if	you were	to be successful in		
obtaining this re		,		•			
Notice period re	Notice period required with current employer:						
Tax or HR Experience – please give details including IT experience							

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rofessiona	al Memberships— please give details of any membership of professional bodies
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Personal Development – please include any courses, membership, voluntary work or responsibilities you have obtained that you consider relevant:				
<b>Leisure</b> Please give details of your leisure interests, sports and hobbies and other pastimes.				

### References – see attached Reference Consent Form

Please give the names, Company name and addresses of two people from whom we may obtain a character and work character or work experience references. Please advise us if you would prefer us not to approach any reference and the reason why.

#### Data Protection Statement

The Company will use the information provided by you on this form, and by the referees you have noted, to process your application for employment. We will treat all personal information with the utmost confidentiality and in line with current data protection legislation.

The information will be subsequently used for the administration of your employment should you be successful in your application and in relation to any legal challenge which may be made regarding our recruitment practices.

The information may be crosschecked with third parties. We may also pass the information to third parties with a view to detecting or preventing crime or in accordance with other laws which require us to do so.

Your signature on this application form will be taken to signify your agreement to our processing of your sensitive personal data in accordance with our registration with the Information Commissioner.

#### **Declaration**

I can confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment offered. I understand that any offer of employment is subject to the Company being satisfied with the results of series of relevant



checks including references, eligibility to work in the UK, probationary period and a medical report (in line with the operation of the Equality Act 2010).

You may use a separate sheet to include more information on any of the above questions if necessary, marking clearly the page number.

Signed:	. Dated:	

#### What To Do Next

Please return this form by post, marked Strictly Private & Confidential to

Andrea Palmer, Head of HR, Aspire Business Partnership, Seneca House, Buntsford Park Road, Bromsgrove, B60 3DX

Or electronically to

enquire@aspirepartnership.co.uk

#### FORM TO GRANT PERMISSION FOR AN EMPLOYER TO SEEK REFERENCES

Please complete the following details to permit the Company to contact referees on your behalf. The first referee should be your current or most recent employer. The second referee should be your previous employer or if you are unable to provide two employment related referees, please provide a personal reference/academic reference/character reference.

1	Company Name:



	Address:
	Telephone Number:
	Contact Name:
	Email Address:
	Relationship to you:
	Has this person provided consent to you submitting them as a referee: [YES/NO]
	Company Name:
2	Address:
	Telephone Number:
	Contact Name:
	Email Address:
	Relationship to you:
	Has this person provided consent to you submitting them as a referee: [YES/NO]

Signed		 	_
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