

**APPLICATION FOR EMPLOYMENT
PRIVATE & CONFIDENTIAL**

Form AP5



Lancashire Cricket Board

Please type or complete the application form in BLACK INK. This form is also available in alternative large print format; contact the Lancashire Cricket Board on the telephone number given at the end of this application form.

Please do not enclose a curriculum vitae, as this will not be considered.

Post applied for:
How did you hear about this vacancy?
If via an advertisement, please state publication:

PERSONAL DETAILS

Surname:	Forename(s):	Title:
Address (incl. Post Code):		
Telephone Numbers:	E-Mail:	
Date of Birth:	Gender: (please delete as appropriate) Male / Female	
Ethnic Origin: (for monitoring purposes only) a) White (British / Irish) b) Asian or Asian British (Indian / Pakistani / Bangladeshi / Kashmiri / Sikh) c) Black or Black British (Caribbean / African) d) Chinese e) Mixed (White & Black Caribbean / White & Black African / White & Asian / Other) f) Other ethnic group, please specify:		
Current Driving Licence? Yes/No	Groups:	Expiry Date:
		Endorsements:

EDUCATION HISTORY

Dates	Establishment / Organisation	Details / Qualifications gained	Grade / Level

Continue on a separate sheet if required.

PROFESSIONAL QUALIFICATIONS / MEMBERSHIP

Qualification / Membership:	Date Completed / Expiry Date:

EMPLOYMENT HISTORY (most recent first)

Dates	Name & Address of Employer	Job Titles & Duties	Start/Finish Salary	Reason for leaving

Notice required to current employer:

Continue on a separate sheet if required.

OTHER EMPLOYMENT

Please note any other employment you would continue with if you were successful in obtaining this position:

LEISURE

Please note here your leisure interests, sports and hobbies, other pastimes, etc.:

CRIMINAL RECORD

Please note any criminal conviction except those ‘spent’ under the Rehabilitation of Offenders Act 1974. If none, please state. (Do not include motoring offences)

HEALTH DETAILS

Are you disabled? YES/NO. If YES, please give details and specify any special needs in relation to your disability.

Please list any diseases, disorders, allergies, muscular or skeletal injuries from which you suffer or have suffered?

Please detail any form of medication, drugs or treatment you are currently and/or regularly receiving?

Please list all absences from work in the past 12 months and the reasons for such absences?

REFERENCES

Please note here the names and addresses of two persons from whom we may obtain both work experience and character references:

Work Experience Referee:

Character Referee:

SUPPORTING INFORMATION

With close reference to the Job Description and Person Specification, please give an account of any experience / knowledge, skills and training you have which meet the requirements of this post. Please include any other information you feel is relevant in support of your application, e.g. What you can offer to the post / the organisation. Please use additional sheets if required.

DECLARATION

Are you subject to immigration controls? YES / NO
(if yes, please give details on a separate sheet)

Are you free to remain and take up employment in the UK? YES / NO

1. I confirm that the information given on this form is correct, and any misleading or falsified information may be proper cause for rejection, or if employed, cause for dismissal.

2. I agree that the organisation reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission, prior to consulting your doctor).

3. I authorise the LCB to obtain references to support this application, and accept and release the LCB and referees from any liability caused by giving and receiving information.

4. I give express permission for the personal data on this form to be held and processed by the LCB.

Signed:

Date:

DATA PROTECTION ACT 1998

All information contained in this form will be treated as strictly confidential, when used for recruitment purposes only. However, the LCB is under a duty to protect the funds it administers and to this end may use the information you have provided on this form for prevention and detection of fraud. It may also share this information with other bodies administering funds for this purpose.

By supplying information, you will also be indicating your consent to the information being processed for all employment purposes as defined in the Data Protection Act 1998, and any verification checks, which may be made. It will be copied for use during the recruitment process. Once the recruitment process is completed, the data will be stored for a maximum of 6 months then destroyed. If you are a successful candidate, your application form will be used as part of your personnel record.

FORM RETURN

Please return this form to: **Lancashire Cricket Board, Emirates Old Trafford, Manchester, M16 0PX**, alternatively e-mail it to: lcb@lccc.co.uk.

Office Tel: 0161 868 6865

Company Registration Number: 7410828

Country of Registration: United Kingdom

Website: www.lancashirecricket.co.uk