

Your Name:

Position Applied For:

Thank you for your interest in employment with Moore Allen & Innocent LLP. This form is the first stage in the firm's recruitment procedure and enables your application to be processed without delay.

Because of the nature of the firm's business some searching questions must be asked, however all information you provide will be treated in the strictest confidence and if unsuccessful your information will be stored in line with the Data Protection Act. And GDPR Regulations. All details **may** be subject to verification if your application proceeds beyond this stage and will be used by the firm to create a personnel record.

By completing this form, you give the firm permission to collect, retain and process information about you, such as age, sex and ethnic origin. This information will only be used so that we can monitor our compliance with the law and best practice in terms of equal opportunity and non-discrimination (Data Protection Act).

CONFIDENTIAL WHEN COMPLETED

Please complete this form in blue or black ink before returning it to:

The Partnership Manager
Moore Allen & Innocent LLP
33 Castle Street
Cirencester
Gloucestershire
GL7 1QD

Tel: 01285 651831
www.mooreallen.co.uk



NOTE: * on this form means please delete where appropriate

1. What position are you applying for?

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2. Where did you hear about this vacancy?
(If recommended by one of our current employee's, please give their name)

3. Surname:
(Title: Mr/Mrs/Miss/Ms/Dr/Other*)

4. Forename(s):

5. Address:
..... **Post Code:**

6. Telephone (Home):

Telephone (Work)::
(May we contact you on this number? Y/N*)

Telephone (Mobile):

Email Address:

7. Homeowner? Y/N*

8. Country of Birth:

9. Work permit required? Y/N*

10. For the purposes of the Asylum and Immigration Act, please give details of all addresses you have lived at during the past five years (not including the above):

Dates		Address(es)
From	To	

11. **Car Driver?** Y/N*

i) Have you ever been banned from driving? Y/N* (If yes please explain)

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12. a) **How many days' sick have you had off work in the last 12 months of employment?** (Please give reasons for absence)

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b) If applicable, on how many occasions were you absent for 3 or more days?

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13. **Have you worked for Moore Allen & Innocent LLP previously?** Y/N*
(If yes please give details including why you left)

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14. **Do you have a relative or acquaintance who works (or has worked) at Moore Allen & Innocent LLP?** Y/N*
(If yes please give details)

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15. **Have you ever been convicted of a criminal offence or is any prosecution pending (excluding minor driving convictions) by a civil or criminal court? (Declaration is subject to the Rehabilitation of Offenders Act).** Y/N* (If yes please give details)

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16. **Have you ever been subject to any action taken under disciplinary procedures by an employer or dismissed from employment?** Y/N* (If yes please give details)

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17. **Education:** Please give details of full and part time education from secondary school onwards.

Secondary Education

Name of school or college	Subject taken	Results

Education beyond Secondary Level:

Name of college/university or other institution	Subject taken	Results

Professional Qualifications or Membership of Professional Institutions

Institution/society	Grade	Membership No.	Date Joined

18. Previous Training

Please give details of any specialised training received and/or courses attended.

Course	Course provider	Dates attended

19. Ongoing Training

Please give details of any current/ongoing training.

Course	Course provider	Required No. of days off work

20. Employment History

Please give details of all positions held since completing your full-time education. Start with your current or most recent position first and use additional paper if required.

Current/ Most Recent Employer:

Nature of Business:

Date Started (Month and Year): Date Left (Month and year):

Current Position:

Duties and Responsibilities:.....

.....

.....

Final salary (inc. all benefits):

Reasons for leaving/wanting to leave:

.....

.....

- A. Previous Employer:
Nature of Business:
Date Started (Month and Year): Date Left (Month and year):
Position Held:
Duties and Responsibilities:
.....
Final salary (inc. all benefits):
Reasons for leaving:
.....

- B. Previous Employer:
Nature of Business:
Date Started (Month and Year): Date Left (Month and year):
Position Held:
Duties and Responsibilities:
.....
Final salary (inc. all benefits):
Reasons for leaving:
.....

- C. Previous Employer:
Nature of Business:
Date Started (Month and Year): Date Left (Month and year):
Position Held:
Duties and Responsibilities:
.....
Final salary (inc. all benefits):
Reasons for leaving:
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21. **Interests - Please describe your leisure interests/hobbies:**

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22. **Other Skills - (e.g. languages, computer keyboard skills etc.)**

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23. **Please give the names and addresses of two individuals (who are not related to you) who are in a position to comment on your professional/work ability. At least one reference should be your previous/current employer. (References will not be taken up without your knowledge)**

Name:		Name	
Position:		Position	
Company:		Company	
Contact (address) to include postcode:		Contact (address) to include postcode	
Contact (email):		Contact (email)	
Contact (telephone):		Contact (telephone)	
Contact (mobile)		Contact (mobile)	

ADDITIONAL INFORMATION

24. **Please provide information about any additional work outside your full-time employment (please note under the 'Working Time Directive' you are obliged to notify the Company)?**

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25. **Briefly describe any personal qualities you believe you possess for the position you are applying for? (continue on a separate sheet if required)**

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26. **Please add any information you feel will support your application. (continue on a separate sheet if required)**

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27. **Please give dates of any holidays booked for the next six months:**

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28. **When would you be able to start work if offered a position?**

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Statement by applicant:

"I confirm that the information given on this application form is correct and accept that providing deliberate, false information could result in my immediate dismissal if offered a position with the Company.

I understand that any offer may be conditional on the results of a medical examination or credit reference search that the Company may wish to carry out. Completion of this form in no way binds the Company to offer me employment and that no contractual relations will exist between the two parties until such time as I have signed a form of contract or accept in writing the terms of a letter of appointment.

I have also read and understand the guidelines relating to use of data from information given in this form."

Signature of applicant: Date:

Please Print Full Name

EQUAL OPPORTUNITIES MONITORING

Moore Allen & Innocent LLP wants to meet the aims and commitments set out in its equality and employment policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary. Please return the completed form in the envelope marked 'Strictly confidential' to the Partnership Manager, Moore Allen & Innocent LLP, 33 Castle Street, Cirencester, Gloucestershire GL7 1QD.

Gender Man Woman Intersex Non-binary Prefer not to say If you prefer to use your own term, please specify here

Are you married or in a civil partnership? Yes No Prefer not to say

Age 16-24 25-29 30-34 35-39 40-44 45-49
50-54 55-59 60-64 65+ Prefer not to say

What is your ethnicity?

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box

White

English Welsh Scottish Northern Irish Irish
British Gypsy or Irish Traveller Prefer not to say

Any other white background, please write in: _____

Mixed/multiple ethnic groups

White and Black Caribbean White and Black African White and Asian

Prefer not to say Any other mixed background, please write in: _____

Asian/Asian British

Indian Pakistani Bangladeshi Chinese Prefer not to say

Any other Asian background, please write in: _____

Black/ African/ Caribbean/ Black British

African Caribbean Prefer not to say

Any other Black/African/Caribbean background, please write in: _____

Other ethnic group

Arab Prefer not to say Any other ethnic group, please write in: _____

Do you consider yourself to have a disability or health condition?

Yes No Prefer not to say

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a 'reasonable adjustment', then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

What is your sexual orientation?

Heterosexual Gay Lesbian Bisexual
Prefer not to say If you prefer to use your own term, please specify here :

What is your religion or belief?

No religion or belief Buddhist Christian Hindu Jewish
 Muslim Sikh Prefer not to say
 If other religion or belief, please write in:

What is your current working pattern?

Full-time Part-time Prefer not to say

What is your flexible working arrangement?

None Flexi-time Staggered hours Term-time hours
Annualised hours Job-share Flexible shifts Compressed hours
Homeworking Prefer not to say If other, please write in:

Do you have caring responsibilities? If yes, please tick all that apply

None
Primary carer of a child/children (under 18)
Primary carer of disabled child/children
Primary carer of disabled adult (18 and over)
Primary carer of older person
Secondary carer (another person carries out the main caring role)
Prefer not to say