

APPLICATION FOR EMPLOYMENT

You are invited to complete this application form as the first and very important stage of our recruitment process. The information you provide on this application form will be used to decide whether we should invite you to an interview. All the details you provide will be treated in strictest confidence.

As an Equal Opportunities & Diversity Employer, this application form is designed so that information can be compared on a like for like basis. Therefore please do not attach a CV or complete any sections as "Refer to CV". (Please use black ink or typescript)

Post Applied for:

Park/Site:

Closing Date:

Where Advertisement Seen:

Surname:		Forename(s):		Title:
Home Address:		Communications Address:		
Postcode:		National Insurance No:		
Tel No(s): Home: Work: Mobile:		Email Address:		
Current Driving Licence?: Yes/No Expiry Date: Details of Endorsements:		Have you worked for South Lakeland Parks before? If YES, please provide details. Have you previously applied to South Lakeland Parks Ltd before? If YES, please provide details.		
EDUCATION HISTORY				
Secondary School(s)/College(s) Attended	From	To	Examinations Taken (include date, level and grade)	

Sixth Form/Further Education College/Specialist training or Management Centre	From	To	Examinations Taken (include date, level and grade)
University/Polytechnic/Other	From	To	Examinations Taken (include date, level and grade)
Further Qualifications (In-house Training or ICT Qualifications)	From	To	Examinations Taken (include date, level and grade)
Name of Membership of Professional Organisations and Institutions	Date Attained	Reg. No	By Examination Yes/No

EMPLOYMENT HISTORY

PRESENT OR MOST RECENT POST

Full Name and Address of Employer	Job Title Grade Present Salary Benefits	Date appointed Date of Leaving (if appropriate) or Period of Notice.
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Summary of present duties and responsibilities

Major Achievements

If required would you have daily access to transport? YES/NO

PREVIOUS EMPLOYMENT
In date order, latest first, with no gaps unaccounted for. **Continue on a separate sheet if necessary.** (South Lakeland Parks reserves the right to contact all or any employees you have listed below, in order to verify the employment details stated)

Dates (from – to)	Name and Address of Employer	Job Title & Main Responsibilities	Start/Finish salary	Reason for Leaving

FURTHER DETAILS

Please use this section to support your application by giving an account of relevant experience, skills and knowledge gained together with your main achievements to date. **You may continue on a separate sheet if necessary.**

Please give details of leisure interests, membership of organisations, voluntary work (students please include school/college activities)

OTHER EMPLOYMENT

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

CRIMINAL RECORD	
Please note any other convictions except those 'spent' under the Rehabilitation of Offenders Act 1974. If none, please state.	
HEALTH DETAILS	
Disability Discrimination Act 1995	
Are you disabled? YES/NO	
If YES, please provide details & specify any special needs in relation to your disability. Information given will be treated in strictest confidence.	
Please list any diseases, disorders, allergies, muscular or muscular skeletal injuries from which you have suffered or do suffer.	
Please detail any form of medicine, drugs or treatment you are currently and/or regularly receiving.	
Please list all absences from work in the last 12 months and the reasons for such absences.	
Asylum and Immigration Act, 1996	
Do you require a work permit or "leave to remain date" in order to work in the United Kingdom? YES/NO	
If Yes, do you have a current permit? YES/NO	
REFEREES: <i>Give details of two people to whom you are not related and to whom reference can be made; one should be your current employer, <u>but not employed by South Lakeland Parks Ltd or its subsidiaries</u>; or if you are currently unemployed, your last employer, or, in the case of school leavers, your tutor. The other may be a character referee.</i>	
Name: Full Postal Address: Contact Number: Relationship: Can we contact prior to interview? YES <input type="checkbox"/> NO <input type="checkbox"/>	Name: Full Postal Address: Contact Number: Relationship: Can we contact prior to interview? YES <input type="checkbox"/> NO <input type="checkbox"/>

DECLARATION

I 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 contract offered.

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 contacting your doctor).

Signed:

Date:

All information contained in this form will be treated as strictly confidential, when used for recruitment. 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. (Revised July 2004)

Please return this form to SOUTHLAKELAND PARKS, HUMAN RESOURCES DEPARTMENT, HELME BANK, HELME LANE, NATLAND, KENDAL, CUMBRIA, LA9 7PS.

For Office Use Only1st Interview Comments2nd Interview Comments

Salary Expectations:

Start Date:

Offer Letter: Y/N

Reject: Y/N

Acceptance: Y/N

Reference: Y/N

Medical: Y/N

Equal Opportunity in Employment

Dear Candidate

South Lakeland Parks Ltd is an equal opportunity employer. We recognise that discrimination is unacceptable and although quality of opportunity has been a longstanding feature of our employment practices and procedures, we have made the decision to adopt a formal Equal Opportunity Policy. Breaches of the policy will lead to disciplinary proceedings and, if appropriate, disciplinary action.

The aim of the policy is to ensure no job applicant, employee or worker is discriminated against either directly or indirectly on the grounds of race, colour, nationality, ethnic or national origin, sex, marital status, gender reassignment, sexual orientation, religion or belief, disability or age.

Our recruitment and selection procedures are reviewed to ensure that individuals are selected and promoted on their relative merits and abilities.

All employees are treated equally and given the opportunity and encouragement to progress within the organisation.

South Lakeland Parks Ltd is committed to a program of action to implement and monitor the effectiveness of its Equal Opportunity Policy.

All disabled applicants who meet the minimum criteria for the job will be invited for interview.

PLEASE HELP US TO MONITOR OUR RECRUITMENT AND SELECTION PROCEDURES BY ANSWERING THE QUESTIONS SET OUT ON THE REVERSE SIDE OF THIS SHEET AND BY RETURNING IT WITH YOUR COMPLETED APPLICATION FORM.

This information you provide will be treated in strictest confidence and **WILL NOT BE USED IN THE SELECTION PROCESS.**

Thank you in advance for your co-operation.

Anita Manfredi
Human Resources Manager

Strictly Confidential



Equal Opportunity Monitoring

In order for South Lakeland Parks Ltd to monitor our recruitment and selection processes, and to not discriminate on grounds of race, colour, nationality, ethnic or national origin, sex, marital status, gender re-assignment, sexual orientation, religion or belief, disability or age, please take time to complete the questionnaire below:

POST APPLIED FOR: _____

LOCATION OF POST APPLIED FOR: _____
(please tick one box per section)

<p>1. Gender</p> <p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> Female</p>	<p>2. Marital Status:</p> <p><input type="checkbox"/> Single</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Widowed</p> <p><input type="checkbox"/> Divorced/Separated</p>
<p>3. Please state number and ages of any dependants:</p>	<p>4. Do you consider you have a disability?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>5. I would declare my ethnic origin as:</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> British</p> <p><input type="checkbox"/> Irish</p> <p><input type="checkbox"/> Any other white background</p> <p>Mixed</p> <p><input type="checkbox"/> White & Black Caribbean</p> <p><input type="checkbox"/> White & Black African</p> <p><input type="checkbox"/> White and Asian</p> <p><input type="checkbox"/> Any other mixed background</p> <p>Asian/Asian British</p> <p><input type="checkbox"/> Indian</p> <p><input type="checkbox"/> Pakistani</p> <p><input type="checkbox"/> Bangladeshi</p> <p><input type="checkbox"/> Any other Asian background</p> <p>Black/Black British</p> <p><input type="checkbox"/> Caribbean</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Any other Black background</p> <p>Other Ethnic Groups</p> <p><input type="checkbox"/> Chinese</p> <p><input type="checkbox"/> Any other Ethnic Group* *Please Specify _____</p> <p><input type="checkbox"/> Not stated</p>	<p>6. Age Group</p> <p><input type="checkbox"/> Under 20</p> <p><input type="checkbox"/> 20-29</p> <p><input type="checkbox"/> 30-39</p> <p><input type="checkbox"/> 40-49</p> <p><input type="checkbox"/> 50-59</p> <p><input type="checkbox"/> 60-65</p> <p><input type="checkbox"/> 65+</p> <p>7. Religion</p> <p><input type="checkbox"/> Baia</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Buddhist</p> <p><input type="checkbox"/> Muslim</p> <p><input type="checkbox"/> Cof E</p> <p><input type="checkbox"/> Parsi</p> <p><input type="checkbox"/> Roman Catholic</p> <p><input type="checkbox"/> Rastafarian</p> <p><input type="checkbox"/> Christian</p> <p><input type="checkbox"/> Sikh</p> <p><input type="checkbox"/> Hindu</p> <p><input type="checkbox"/> Other* *Please Specify: _____</p> <p>8. Sexual Orientation</p> <p><input type="checkbox"/> Heterosexual</p> <p><input type="checkbox"/> Lesbian</p> <p><input type="checkbox"/> Gay</p> <p><input type="checkbox"/> Bisexual</p> <p><input type="checkbox"/> Other *Please Specify: _____</p>