

**Application for Employment**

**Academic Vacancies**

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| Post Title: | Reference No: |
| School / Department: | Where did you FIRST see the post advertised? |

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| Please indicate any dates when you would be unavailable for interview due to holiday etc.  (The University will endeavour to accommodate any dates detailed above) |

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| **Education** (from the age of 11) |  |  |  |
| Name of School, University, etc | Full or Part-time | From - To | Qualifications & Grades Obtained  Date of Award & Awarding Body |
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| **Relevant Training Courses Attended, Professional Memberships Held. etc** |

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| **Present or most recent employment** | | | |  | |  | |
| Name and Address of Employer | | Post Held | | | Brief description of duties and responsibilities | | |
|  | |  | | |  | | |
| Period of appointment  (DD/MM/YY) | From: | | | | | To: | |
| Grade and/or Salary: |  | | | | | Full-time or Part time: | |
| Period of Notice required if applicable: | | |  | | | |  |
| Reason for leaving if applicable: | | |  | | | |  |

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| **Previous Employment,** most recent first.  Please specify exact employment dates (DD/MM/YY) | | | | |
| Name and Address of Employer | Post Held | Full or  Part-time | From To | Reason for  leaving |
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| **Additional Information**  Please give detailed examples of any experience or training which shows how you meet the criteria for the job and person specification, together with any other information you wish to add in support of your application. Please cover the following areas:  Teaching, Research and Administrative Activity Subjects taught and at what level  Other subjects of interest Research Grants held  Editorial and reviewing work Fully referenced publications  Resource management Project management  Continue on a separate page as necessary |
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| **Convictions** | | | | |
| **Have you ever been convicted of a criminal offence? Yes No**  **please attach details**  **You are not required to give details of a ‘spent’ conviction as provided by the Rehabilitation of Offenders Act 1974 unless the post is one that involves direct contact with children or vulnerable adults where we need to know all convictions. Please refer to the Job Description of the post.** | | | | |
| **Referees**  Please give the names of the referees below: two for support staff posts, three for academic posts.  **The references need to cover the last 3 years of your employment.**  **If you are shortlisted references may be taken up automatically prior to interview unless you request otherwise.**  Please place a cross in the box provided if you do not wish us to contact your referee at interview stage. | | | | |
| **CURRENT/MOST RECENT EMPLOYER**  Please give the name of a referee from your current or most recent employer with line management responsibility for your role. | | | | |
| Name: | | | Position: | Address & Telephone Number |
| e-mail address: | | |  |  |
|  |  | I do not wish you to contact this referee at interview stage | | |
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| **SECOND REFEREE**  Name: | | | Position: | Address & Telephone Number |
| e-mail address: | | |  |  |
|  |  | I do not wish you to contact this referee at interview stage | | |
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| **THIRD REFEREE -**  Name: | | | (ACADEMICS/RESEARCH ONLY)  Position: | Address & Telephone Number |
| e-mail address: | | |  |  |
|  |  | I do not wish you to contact this referee at interview stage | | |
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| Are you related to a Governor or employee of the Royal Agricultural University?  If so, please give details: |  |  |

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| I certify that the details in this application are correct.  Signed: ........................................................................ \* Date:...........................................................  \* If you are sending this application form to the University by e-mail then in the absence of this signature you should note that the e-mailing of this application constitutes your personal certification that the details in this application are correct. |

The Royal Agricultural University is committed to an Equal Opportunities Policy in employment and will assess applicants for jobs fairly, encouraging applicants from diverse backgrounds to contribute to the success of the University. Will you kindly fill in this form as fully as possible so that we can monitor the implementation of our Equal Opportunity Policy.

**This section MUST be removed from the application before the selection process begins.**

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| **Surname:**  (Block capitals) | **Forename(s):** | | | **Title:** |
| **Date of birth** | | | **Previous name(s)** | |
| **Marital Status:** | | | | |
| **Address: (include post code please)** | | | **Telephone:** | |
| **e-mail:** | |
| **Gender**  Male / Female / Trans | |
| **Do you require a work permit for employment in UK?** Yes / No | | | **National Insurance Number:** | |
| **My nationality is:** | | | **Where did you see the post advertised?** | |
| I would describe my **ethnicity** as (please tick the appropriate description)  White - British White - Irish  White - Scottish Irish Traveller  Other White background Black or Black British - Caribbean  Black or Black British - African Other Black background  Asian or Asian British - Indian Asian or Asian British - Pakistani  Asian or Asian British - Bangladeshi Chinese  Other Asian background Mixed - White and Black Caribbean  Mixed - White and Black African Mixed - White and Asian  Other Mixed background Other Ethnic background  Not known Information withheld | | | | |
| **Sexuality**  Heterosexual Homosexual  Lesbian Bisexual  Other (Please specify) Information withheld | | **Faith:**  Baha'i Buddhist  Christian Hindu  Jain Jewish  Muslim Rastafarian  Shinto Sikh  Taoist Zoroastrian  Other (please specify) Information withheld | | |
| **Disability:**  No known disability  Specific learning disability (such as dyslexia or dyspraxia)  General learning disability (such as Down's syndrome)  Cognitive impairment (such as autistic spectrum disorder or resulting from head injury)  Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)  Mental health condition (such as depression or schizophrenia)  Physical impairment or mobility issues (such as difficulty using arms or using a wheelchair or crutches)  Deaf or serious hearing impairment Blind or serious visual impairment  Other type of disability Question not answered | | | | |
| I certify that the details in this application are correct.  Signed: ....................................................................... Date:...........................................................  \* If you are sending this application form to the University by e-mail then in the absence of this signature you should note that the e-mailing of this application constitutes your personal certification that the details in this application are correct. | | | | |