

335 Stretford Road, Manchester M15 5ZA

0161 226 1912

info@z-arts.org

APPLICATION FORM		
APPLICATION FOR THE POST OF		

PLEASE COMPLETE ALL SECTIONS

PERSONAL DETAILS	
SURNAME:	
FORENAME(S):	
ADDRESS:	
POSTCODE	
TELEPHONE NUMBER:	
TELEPHONE NUMBER (MOB):	
E-MAIL ADDRESS:	
NATIONAL INSURANCE NUMBER:	

EDUCATION AND TRAINING:		
DETAILS OF QUALIFICATIONS OBTAINED: (Including grades & dates)	DATES	
MEMBERSHIP OF PROFESSIONAL BODIES:		

EMPLOYMENT HISTORY	
PRESENT OR MOST RECENT POST/JOB TITLE:	
NAME OF CURRENT EMPLOYER:	
DATE APPOINTED:	
NOTICE PERIOD:	
BRIEF DESCRIPTION OF DUTIES:	
PREVIOUS EMPLOYMENT:	
(1) POST/JOB TITLE	
NAME OF EMPLOYER	
APPOINTED FROM/TO	
BRIEF DESCRIPTION OF DUTIES	
REASON FOR LEAVING	
(2) POST/JOB TITLE	
NAME OF EMPLOYER	
APPOINTED FROM/TO	
BRIEF DESCRIPTION OF DUTIES	
REASON FOR LEAVING	

PREVIOUS EMPLOYMENT:	
(3) POST/JOB TITLE	
NAME OF EMPLOYER	
APPOINTED FROM/TO	
BRIEF DESCRIPTION OF DUTIES	,
REASON FOR LEAVING	
IF YOU WISH TO TELL US ABOUT ANY FUR	RTHER PREVIOUS EMPLOYMENT, PLEASE
DO SO HERE:	
1	

EXPERIENCE AND ACHIEVEMENTS:		
Give a concise account of relevant experience, current duties or achievements in support of		
this application. Please use the competencies as defined in the job description and person specification		

REFERENCES:		
Please give the name, address and occupation of two referees. Where appropriate, one referee should be your current or most recent employer.		
FIRST REFEREE:	SECOND REFEREE	
NAME:	NAME	
JOB TITLE:	JOB TITLE:	
ADDRESS	ADDRESS	
RELATIONSHIP:	RELATIONSHIP	
TELEPHONE	TELEPHONE	
EMAIL ADDRESS	EMAIL ADDRESS	
Please state where you saw this vacancy advertised		
I certify to the best of my knowledge all the information I have given is correct. I understand that by deliberately giving false answers the offer of employment will be withdrawn.		
SIGNED: DATE:		

When completed this form should be posted to: Paul Roberts

Z-arts

335 Stretford Road

Hulme Manchester M15 5ZA

Or emailed to: paul@z-arts.org