|  |  |
| --- | --- |
| Role Applying for |  |
| Available start date |  |

APPLICATION FOR EMPLOYMENT

|  |
| --- |
| Personal Details |
| Full Name  |
| Address |  | Home No. |  |
| Mobile |  |
| Postcode |  | Email |  |
| How do you prefer to be contacted? |  |
| Eligibility to work in the UK. Do you require a work permit?Please put an (x) in the box that is appropriate to you. |  | Yes |  | **No** |
| Do you hold a full UK driving licence? Please put an (x) in the box that is appropriate to you. |  | Yes |  | **No** |
| National Insurance Number |  |

|  |
| --- |
| Employment History- Current employer |
| Name of employer  |
| Address |  | Contact No. |  |
| Email |  |
| Postcode |  | Job title  |  |
| Reason for leaving If not applicable please put N/A |  |
| Dates of employment  | **From** |  | **To** |  |
| Salary  |  |
| Bonus If not applicable please put N/A |  |

|  |
| --- |
| Employment History- Previous employer |
| Name of employer  |
| Address |  | Contact No. |  |
| Email |  |
| Postcode |  | Job title  |  |
| Reason for leaving If not applicable please put N/A |  |
| Dates of employment  | **From** |  | **To** |  |
| Salary  |  |
| Bonus If not applicable please put N/A |  |

|  |
| --- |
| Education, Training & Qualifications  |

|  |  |  |
| --- | --- | --- |
| School/College/Uni/Training provider | Dates (from-to) | Results (achievement) |
|  |  |  |

|  |
| --- |
| Rehabilitation of Offenders Act 1974  |
| Certain posts are exempt from the Rehabilitation of Offenders Act 1974. Applicants for such posts are required to declare all criminal convictions, spent or unspent. This includes any posts where the post-holder is likely to have access to children or where there is potential for fraud. **Where posts fall under this exemption, this will be indicated in the further particulars.** Applicants for such posts must provide the following information: |

|  |  |
| --- | --- |
| Do you any convictions spent or unspent under Rehabilitation of Offenders Act? | **Yes No** |
| If yes please provide further detail |  |

|  |
| --- |
| Information to support your application |
| Briefly tell us how you meet the Job Description. Please include any further information which you believe is relevant to your application.  |

|  |
| --- |
| Education, Training & Qualifications  |

|  |  |
| --- | --- |
| Why do you want to work at Tranmere Rovers FC? |  |
| What is your biggest professional achievement? |  |
| Briefly outline your skills and experience that makes you a good fit for this role |  |

|  |
| --- |
| References  |
| Please give the names and contact details of two referees. Please include your present or last employer. Please note we cannot accept references from relatives.  |

|  |  |  |
| --- | --- | --- |
|  | Referee 1 | Referee 2 |
| Name |  |  |
| Company |  |  |
| Position |  |  |
| Phone |  |  |
| Email |  |  |
| Address |  |  |
| Can a reference be obtained now? | YES NO | YES NO |

\* Please note, that should any information provided in the application form be found to be false, should there be any wilful omission or suppression of information directly relevant to the position, or failure to conform to any of the organisations policies, this may lead to the withdrawal of the offer of employment, or the subsequent termination of your employment.

To be returned either by email to:

recruitment@tranmererovers.co.uk

Or via post to:

Personnel Recruitment

Tranmere Rovers Football Club

Prenton Park

Prenton Road West

Wirral

CH42 9PY

**Please submit by the closing date specified on the job description.**

Equality, diversity and inclusion monitoring form

TRFC is an equal opportunities employer. The aim of our policy is to ensure that no job applicant or employee receives less favourable treatment on the grounds of sex, sexual orientation, marital status, race, religion, colour, nationality, ethnic or national origins or disability or is disadvantaged by conditions or requirements which cannot be shown to be justifiable.

Recruitment, selection and promotion procedures will be monitored to ensure that individuals are selected, promoted and treated on the basis of their relevant merits and abilities.

To assist TRFC in monitoring the operation of its equal opportunities policy, and for no other reason, please answer the following questions by ticking boxes as appropriate. This information will be detached before your application is passed on for shortlisting.

|  |  |
| --- | --- |
| Name: |  |
| Post applied for: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  |  |  |

**Ethnicity**

What is your ethnic group? Please choose one section, then tick the appropriate box to indicate your cultural background:

|  |  |
| --- | --- |
| **Asian or Asian British** | **Mixed** |
| Bangladeshi |  | White and Asian |  |
| Indian |  | White and Black African |  |
| Pakistani |  | White and Black Caribbean |  |
| Any other Asian background |  | Any other Mixed background |  |
| **Black or Black British** | **White** |
| African |  | British |  |
| Caribbean |  | Irish |  |
| Any other Black background |  | Any other White background |  |
| **Chinese or other ethnic group** | If you have ticked ‘Any Other’ – please describe you ethnicity here: |
| Chinese |  |
| Any Other |  |

**Nationality**

|  |  |
| --- | --- |
| Nationality |  |
| National identity (if different) |  |

Eg British/Welsh

**Disability**

|  |  |  |  |
| --- | --- | --- | --- |
| I am disabled |  | I am not disabled |  |

Which one of the following statements about disability is most appropriate to you?

**Age**

|  |  |  |  |
| --- | --- | --- | --- |
| Date of birth |  |  |  |

**Gender**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Female |  | Intersex\* |  | Male |  | Other\*\* |  |

**\*** Neither male nor female but ‘intermediate’, i.e. unable to be classed as male or female;

\*\* Eg. Transitioning

**Marital/Partnership Status**

Are you:

|  |  |
| --- | --- |
| In a Civil Partnership |  |
| Living with Partner |  |
| Married |  |
| Single\* |  |
| Widowed |  |

\* ‘Single’ includes not married and divorced.

**Carer Status**

Are you:

|  |  |
| --- | --- |
| A Carer with Dependant Child/Children or other Dependants with significant health/social care needs |  |

**Thank you for your assistance in completing this form**