

**Maternity Worldwide Application Form**

To complete this application please type into the grey boxes. Typed applications are preferred, alternatively you can print the application and complete in black pen.

**Position Applying For:**

**Personal Information**

Title:       First Name:       Surname:

Address:

Email:       Mobile:       Home Number:

**Vacancy**

How did you hear about the vacancy?

Have you previously applied for a position with Maternity Worldwide?

**Employment History**

Please give details of up to four previous posts starting with your current or most recent employment.

**Current Employer**

Dates of employment:       Salary:

Employer name and address:

Position held and details of responsibilities (max 500 words):

Reason for leaving:

**Employer 2**

Dates of employment:       Salary:

Employer name and address:

Position held and details of responsibilities (max 500 words):

Reason for leaving:

**Employer 3**

Dates of employment:       Salary:

Employer name and address:

Position held and details of responsibilities (max 500 words):

Reason for leaving:

**Employer 4**

Dates of employment:       Salary:

Employer name and address:

Position held and details of responsibilities (max 500 words):

Reason for leaving:

**Education**

Please give details of your education and qualifications starting with highest level of education. Please use additional rows as required.

| **Date** | **Educational establishment** | **Qualifications obtained** |
| --- | --- | --- |
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|  |  |  |
|  |  |  |

**Training**

Please indicate any training courses or additional qualifications which are relevant to this role.

|  |  |  |
| --- | --- | --- |
| **Date** | **Type of Course / Qualification** | **Qualifications obtained** |
|  |  |  |
|  |  |  |

**Additional Information**

Please use the following section to outline your relevant skills and experience, how you meet the person specification, and add any other relevant information in support of your application. You may use additional space if required, please do not exceed two sides of A4.

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Please use the following section to explain why you would like to work for Maternity Worldwide. Please do not exceed one side of A4.

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|  |

Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013). Please note, as part of this role a full DBS check will be required.

|  |
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| **Yes or No**  If yes, please give details |

**References**

Please provide details of two references, one must be your current or most recent employer; the other must have known you in a professional capacity. Your current employer will not be approached without your consent.

**Referee 1**

Name:       Organisation:       Job Title:

Email:       Contact Number:

Relationship to you:

**Referee 2**

Name:       Organisation:       Job Title:

Email:       Contact Number:

Relationship to you:

**How much notice do you have to give your current employer?**

I confirm that all of the information contained in this application and any supporting documentation is true. I understand that misrepresentation made by me may be cause for dismissal if I am successful in my application.

**Signed:**       **Date:**

Please return completed application form, along with an Equal Opportunities Form to vacancies@maternityworldwide.org. If you have any questions please do not hesitate to email the above address or call 01273 234033. Thank you for your application.