APPLICATION FORM



POSITION(S) APPLIED FOR:		
How did you become aware of the	vacancy?	
PERSONAL DETAILS:		
Title (Mr / Mrs / Miss / Ms / Other):		
Surname:		
First Name(s):		
Address:		
Postcode:		
Telephone Number:		
Mobile Number:		
Email address:		
National Insurance Number:		
FAN ID Number:		
Do you have a full valid	Vas D Na D	Please provide details of any points or convictions;
Do you have a full valid clean driving licence?	Yes No	
Please state preferred employment type, i.e. part-time,		
full-time, match-days, weekends.		

Please provide the person(s) to who					
kr	nown at DCCT.				
PRESENT / LAS	T EMPLOYM	ENT DETAI	LS		
Name	e of Employer:				
Natur	e of Business:				
	Job Title:	From:	To:		
Reason for Leaving	(if applicable):				
Salary (current o	or on leaving):				
Provide brief de performed, respon used or learned, adv promotions while y	sibilities, skills ancements or				
No	tice Required:				
	·				
PREVIOUS EMPL					
Please provide details so that there are no g					nemployment, travel etc ecessary.
Company Name	Job Title		Dates From	Employed To	Reason for Leaving

EDUCATION

School, College, University	Qualification Obtained	Grade	Date Obtained
			1
] [
		$\exists \vdash$] [
			J
			J
TRAINING COURSES ATTI	ENDED		Date
Course Title	Training Provider	Duration	Completed
			1
			- -
]
]
			J L
MEMBERSHIP OF PROFES Please provide details of the inst	itution / association, and the level or g	grade of membersh	
Professional Body / Association	Current Status		Date Admitted
] [
			- <u> </u>

AD DITIONAL DETAILS Please provide details of why you are interested in applying for the post and demonstrate, using examples of how your skills, past achievements, qualifications, experience and personal qualities make you suited for the role. (Limited to 3,500 characters)

REFERENCES

All appointments are subject to the receipt of two satisfactory references. Please provide details of two referees, this should be previous/current line managers who have knowledge of your work performance. Please note, your reference cannot be a current member of DCCT staff. If a member of DCCT staff is listed as a referee this could delay the on boarding process.

REFEREE 1	Name:	
	Job Title:	
	Company:	
	Address:	
	Email Address:	
Tele	phone Number:	
Job Role in which you	u were employed:	
Dates	of Employment:	From: To:
REFEREE 2		
	Name:	
	Job Title:	
	Company:	
	Address:	
	Email Address:	
Tele	phone Number:	
Job Role in which you	u were employed:	
Dates	of Employment:	From: To:
D 1		
טט we nave permis	ssion to contact y	our referees prior to job offer; Yes No

HEFEHENLES
If the role for which you are applying is not exempt from the Rehabilitation of Offenders Act 1974, you only need to provide details about previous convictions which are 'unspent'.
Please confirm if you have any unspent criminal convictions.
Yes No No
If the position for which you are applying may involve contact with children, it is exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England and Wales). For these positions you are not entitled to withhold information about police cautions, 'bind-overs' or any criminal convictions including any that would otherwise be considered 'spent' under the Act.
Have you ever been convicted of any offence or 'bound-over' or given a caution?
Yes No No
Are you currently the subject of any on-going criminal investigations or are you awaiting the outcome of any charges pending against you?
Yes No No
Have you had any contact with the police or involvement or findings by Civil/Family Courts in this country or abroad?
Yes No No
If you have replied yes to any of the above questions on this page please provide details, including dates on a separate sheet and attach it to this form in an envelope marked 'Strictly Private and Confidential – Addressee Only'.
Please note that if your application is successful you may be required to obtain a DBS Disclosure at the appropriate level.
DECLARATION
I certify that the information supplied in this application and associated attachments is complete and accurate and that I have not knowingly withheld information that might adversely affect my chances for employment. I understandthat any failure to disclose information, or any attempt to mislead Derby County Football Club could result in the withdrawal of any offer of appointment, or lead to disciplinary action being taken, including dismissal, and possible criminal prosecution.
I authorise Derby County Football Club Ltd to investigate my references, work records, education, criminal background and other matters relating to the suitability of my employment.
In accordance with the Data Protection Act 1998, I agree that Derby County Football Club may hold and use personal information about me and keep in touch with me should suitable vacancies come available in the future. This information, including that contained in this form, can be stored on both manual and computer files. It will be held securely and only accessed by authorised personnel.

Date: _____

Signed:

Please attach additional information sheets as necessary.

Completed forms should be returned to;

HR Department Derby County Community Trust 14 Pride Point Drive Derby DE24 8BX

Thank you for completing this application form and for your interest in our business.