

Application Form for NSA Policy & Technical Officer PRIVATE AND CONFIDENTIAL

Please return this form, with your CV and a covering letter, to Joanne Briggs, NSA Operations Director, at joanne@nationalsheep.org.uk.

Do you hold a current driving licence? Yes/No How many points on your licence?

Mr/Mrs/Miss/Other

Full Name

Title

Address

Email Address

Chief Executive: Phil Stocker

A company limited by Guarantee, Registered in England, Registration No. 37818, Registered charity in England and Wales (249255) and in Scotland (SC042853)

National Sheep Association is an organisation which represents the views and interests of sheep producers throughout the UK NSA is funded by its membership of sheep farmers and its activities involve it in every aspect of the sheep industry.

Telephone number(s)

Are there any restrictions on you taking up employment in the UK?				Yes/No		
EMPLOYMENT HISTORY additional information h			• •	• •	plus	
Name of employer	Job title		Salary / rate of pay	Reason for lea	Reason for leaving	
Notice required in curr	ent post (if appli	cable)				
Any other employment	t (e.g. part-time c	or voluntai	y)			
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your business your future

REFERENCES: Please provide names and contact details for two referees. We will not contact them until we have gained your consent. Referee 1 Referee 2 **CRIMINAL CONVICTIONS:** Please note any criminal convictions except those spent under the Rehabilitation of Offenders Act 1974. If none, please state. In certain circumstances employment is dependent upon obtaining a satisfactory basic disclosure from the Criminal Records Bureau/Disclosure Scotland. **DECLARATION** (Please read this carefully before signing the application) 1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered. 2. I agree that the organisation reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor). 3. I agree this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act. 4. I agree that should I be successful in this application, I will, if required, apply to the Criminal Records Bureau/Disclosure Scotland for a basic disclosure. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the company, any offer of employment may be withdrawn or my employment terminated. Signed Date