



**National Sheep Association**

**Application Form for NSA Digital Communications Officer**

**PRIVATE AND CONFIDENTIAL**

Please return this form, with your CV and a covering letter, to Katie James, NSA Communications Manager, at [katie@nationalsheep.org.uk](mailto:katie@nationalsheep.org.uk).

<b>Full Name</b>			
<b>Title</b>	Mr/Mrs/Miss/Other		
<b>Address</b>			
<b>Email Address</b>			
<b>Telephone number(s)</b>			
<b>NI number</b>			
<b>Do you hold a current driving licence?</b>	Yes/No	<b>How many points on your licence?</b>	
<b>Are there any restrictions on you taking up employment in the UK?</b>	Yes/No		

**EMPLOYMENT HISTORY:** Please include education and employment history on your CV, plus additional information here about your current and immediate previous employer(s).

<b>Name of employer</b>	<b>Job title</b>	<b>Salary / rate of pay</b>	<b>Reason for leaving</b>
<b>Notice required in current post (if applicable)</b>			
<b>Any other employment (e.g. part-time or voluntary)</b>			



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)





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**REFERENCES:** Please provide names and contact details of two referees. We will not contact them until we have spoken to you and gained your consent.

Referee 1	Referee 2

**CRIMINAL RECORD:** 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.

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**DECLARATION** (Please read this carefully before signing this application)

1. I confirm 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 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