



Please complete in black ink or print.

Sensory Services by Sight for Surrey
Rentwood, School Lane, Fetcham, Surrey, KT22 9JX

Application for Appointment as: Vision Rehabilitation Specialist

Closing date: 5th February 2024

PERSONAL DETAILS

Surname:		First Name/s:		Title:
Any former names by which you have been known in the past:				
Address:				
Postcode:				
Contact Tel Nos.	Home:	Work:	Mobile:	
Email address:				

Do you require a permit to work in the UK?	YES	NO
If YES, please give details:		
In accordance with the Asylum and Immigration Act 1996, Sec. 8, all new employees must provide documentary evidence of entitlement to work in the UK. Please bring appropriate documents if you are called for an interview.		

Do you have any unspent criminal convictions, police cautions or any criminal case pending?	YES	NO
If YES, please give details.		
Depending on the role you have applied for, you will be required to complete an application to the Disclosure & Barring Service (DBS).		

EDUCATION

PRIVATE AND CONFIDENTIAL (When completed)

Secondary Schools, College, University etc. and qualifications gained (with dates)
Use a separate sheet if necessary

Professional Qualifications (please give brief details of qualification, institution where gained, dates etc.)

TRAINING

Please give brief details of any other training undertaken (use another sheet if necessary)

EMPLOYMENT HISTORY (BOTH PAID AND VOLUNTARY)

Present Employment:

Name and address:	
Position held:	Date appointed:
Salary Scale: Present Salary:	Other benefits:
Period of notice required to terminate present employment?	

Brief outline of current responsibilities and job purpose:

Please attach a copy of your CV or list here your previous appointments.

You are invited to state below details of the experience you have gained in your present and previous posts and to explain its relevance to this appointment and give any other appropriate information to support your application (please use another sheet if necessary)

Do you hold a full, current driving licence?	YES	NO
Do you have the use of a car?	YES	NO
If NO, if appropriate for the role, please give details of how you will fulfil the role		

Is there any fact that you consider Sight for Surrey should be made aware of in relation to your potential employment.

YES	NO	If Yes, please give details below:
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Specific requirements for the interview process:

In compliance with the provisions of Section 60 of the Equality Act 2010 the following questions are asked for a specific purpose to make arrangements for any reasonable adjustments to enable you to attend an interview (and provide equal opportunity to perform well at interview).

If you were short-listed for an interview would you have any specific requirements, e.g. timing, wheelchair access, presence of an interpreter (please specify).

Please let us know your preferred reading medium?

Ordinary Print Email
 Large print (please specify size) _____

REFEREES

Please provide names, addresses, contact numbers, email address and relationship of two referees:

If your current or last employer is not one of the two referees, Sight for Surrey may wish to contact him/her. May we do so at this stage? YES/NO

Name: Address: Email address: Contact telephone number: Relationship (i.e. Last employer, colleague, friend etc.):	Can we contact the referees without further reference to you? YES/NO
Name: Address: Email address: Contact telephone number: Relationship (i.e. Last employer, colleague, friend etc.):	Can we contact the referees without further reference to you? YES/NO

Where did you see this post advertised?	
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DECLARATION

I declare that the details given on this application form are to the best of my knowledge and believe, are true and complete. I understand that deliberately giving false statements would disqualify me from consideration or, in the event of appointment, make me liable to dismissal.

I consent to data contained on this application being processed in accordance with the Data Protection Act 2018. I have read and understood the enclosed GDPR Privacy Notice for applicants.

Signature:	Date:
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