



UNIVERSITIES
SUPERANNUATION
SCHEME LIMITED

Private and Confidential

APPLICATION FORM

Post applied for:

PERSONAL DETAILS

Surname: **Title:**

If your surname has changed since leaving any of your previous employment (eg maiden name) please indicate here.

.....

Forenames:

Correspondence Address:

.....

.....

..... **Post code:**

Contact Numbers:

Home: Work: Mobile:

Email address:

Are you a relative of a current Universities Superannuation Scheme Limited employee?

If yes please give details:

.....

EDUCATION

Educational Institution	From	To	Qualifications obtained	
Schools attended:			Subject	Grade
Colleges/Universities attended or correspondence courses taken			Subject	Grade

MEMBERSHIP OF PROFESSIONAL BODIES

Name of professional body	Membership grade	Date of entry and attainment

Details of any other specialised training, knowledge (or experience) not covered in the above sections:

.....

Details of leisure interests and activities:

.....

From what source did you learn of the vacancy?

.....

EMPLOYMENT HISTORY

Please commence by stating your present or last employment, then each preceding employment

Name and address of Employer	From	To	Job title and brief description of duties	Reason for Leaving

Please state your current salary and benefits:

.....
.....

Please state your notice period:

.....

CRIMINAL CONVICTIONS

Universities Superannuation Scheme Limited aims to promote equality of opportunity for all with the right mix of talent, skills and potential. Criminal records will be taken into account for recruitment purposes only when the conviction is relevant.

Have you ever been convicted of a criminal offence or are you at present the subject of criminal charges?

Y	<input type="checkbox"/>	N	<input type="checkbox"/>
---	--------------------------	---	--------------------------

If yes, please give details:

.....
.....

Please note that convictions regarded as ‘spent’ under the terms of Rehabilitation of Offenders Act 1974 need not be disclosed.

Having a criminal record will not necessarily bar you from employment.

If the post you are applying for is subject to a disclosure with the Criminal Records Bureau, you will be required to complete a form that will be sent to you if you are appointed.

DATA PROTECTION ACT 1998

Information on this form may be held on computer/paper records. Strict confidentiality will be observed and disclosures will only be made for payroll and personnel administration purposes. We will be unable to process your application unless we can use your personal data in the ways described above. If your application is unsuccessful the data will be held for six months and then destroyed.

ENTITLEMENT TO WORK IN THE UK

To comply with the Asylum and Immigration Act 1996 (as amended by S147 of the Nationality Immigration and Asylum Act 2002) all prospective employees will be required to supply evidence of eligibility to work in the UK.

If you are appointed to the post you will be provided with further information detailing what documents will be required.

REFERENCES

It is our policy to seek references from all employers during the last ten years of employment. Please indicate which of the employers you would not wish us to contact at this stage.

Name :

Name :

Position :

Position :

Address :

Address :

.....

.....

.....

.....

.....

.....

Telephone No. :

Telephone No. :

Fax No:

Fax No:

email :

email :

Please do not contact at this stage

Please do not contact at this stage

Name :

Name :

Position :

Position :

Address :

Address :

.....

.....

.....

.....

.....

.....

Telephone No. :

Telephone No. :

Fax No:

Fax No:

email :

email :

Please do not contact at this stage

Please do not contact at this stage

MEDICAL HISTORY

On how many days have you been absent from your employment through sickness during the last 12 months?

How many occasions?

Do you have any medical condition or disability for which you would need support in order to carry out the duties of this job?

Y	<input type="checkbox"/>
---	--------------------------

N	<input type="checkbox"/>
---	--------------------------

If yes, please give details:

.....

.....

DECLARATION

I confirm that the information given on this form is, to the best of my knowledge correct. I do acknowledge that any false statement may be sufficient cause for rejection or, if employed, dismissal. I consent to the information supplied in this application being stored in computer/paper records for personnel and payroll purposes.

Signature: Date:

EQUAL OPPORTUNITIES MONITORING FORM

Please complete the form below in order for us to monitor our equal opportunities policies. This information will be held confidentially and is not part of the recruitment process.

Date of Birth:

1 I describe my ethnic origin as:

White

- British A
- Irish B
- Any other White Background C

Black or Black British

- Caribbean M
- African N
- Any other Black background P

Mixed

- White and Black Caribbean D
- White and Black African E
- White and Asian F
- Any other mixed background G

Asian or British Asian

- Indian H
- Pakistani J
- Bangladeshi K
- Any other Asian Background L

Other ethnic categories

- Chinese R
- Any other ethnic category S

Not stated

- Not stated Z

2 Gender

M	<input type="checkbox"/>
F	<input type="checkbox"/>

DISABILITY

These questions are asked in accordance with the Disability Discrimination Act 1995 (and subsequent updates) which defines disability as: “a physical or mental impairment which has a substantial and long-term adverse effect on the ability to carry out normal day to day activities”. The information you provide will help us to help you through the application/interview process.

3 Do you consider yourself to have a disability? Yes No

Is there anything we need to know about your disability in order that you can have a fair interview? eg an accessible interview room. (please state)

.....

.....

Would the provision of any aids or adaptations assist you in carrying out the duties of this post? (please state)

.....