



UNITED SYNAGOGUE JOB APPLICATION FORM PART 1

PLEASE COMPLETE THE FORM IN BLOCK CAPITALS

Application for the Post Of:		Post Reference:	
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1. PERSONAL DETAILS:

Surname:		Title:	
Forenames:			
Address including post code:			
Home Tel No:		Mobile No:	
Work telephone No:		May we contact you at work?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Email Address:		National Insurance No:	

2. EMPLOYMENT HISTORY:

CURRENT OR MOST RECENT POSITION

Employer:		Type of Business:	
Address including post code:		Salary:	
Job Title:		Start Date:	
Notice Required (weeks):		Leave Date (if applicable):	
Brief Description of Duties& Responsibilities (please attach a Job Description if available):			
Why do you wish to /did you leave this position?			

PREVIOUS APPOINTMENTS (*most recent first*): Please continue on a separate sheet if necessary

Employer:					
Address:					
Start Date:	/	/	Job Title:		Salary: £
Leave Date	/	/	Reason for Leaving:		
Brief description of Duties:					
Employer:					
Address:					
Start Date:	/	/	Job Title:		Salary: £
Leave Date	/	/	Reason for Leaving:		
Brief description of Duties:					
Employer:					
Address:					
Start Date:	/	/	Job Title:		Salary: £
Leave Date	/	/	Reason for Leaving:		
Brief description of Duties:					
Employer:					
Address:					
Start Date:	/	/	Job Title:		Salary: £
Leave Date	/	/	Reason for Leaving:		
Brief description of Duties:					

3. EDUCATION & TRAINING

SECONDARY / FURTHER EDUCATION:

School / College / University	Qualifications - Results with Grades*

RELEVANT TRAINING QUALIFICATION & MEMBERSHIPS:

Type of Training (e.g. course)	Dates	Results if applicable*
Membership of Professional Bodies/Professional Qualifications: <i>(with dates)</i> *		

* Copies of relevant certificates should be submitted with this form.

4. VOLUNTARY EXPERIENCE AND OTHER INTERESTS:



5. ADDITIONAL INFORMATION IN SUPPORT OF YOUR APPLICATION:

Please give details of your relevant skills, experience, knowledge and achievements, demonstrating how you meet the requirements of this post. Please continue on a separate sheet if necessary.

* You may continue on only one side of A4 paper, which must be attached to this application form.

6. INTERVIEW DATES

In the event you are shortlisted, please advise of any dates you would be unable to attend an interview:

7. DECLARATION OF APPLICANT:

I certify that the answers given on this Application Form are true and complete, to the best of my knowledge.

Signature: _____

Date: _____

When completed, please return this form either by EMAIL together with Part 2 of the application form to: hr@theus.org.uk In the event this is not possible, post to: HR Department, United Synagogue, 305 Ballards Lane, London N12 8GB. Please note that if you are returning this form electronically and unsigned you will still be bound by the declaration.