

# Application Form

Vacancy: RSPCA WEST DORSET BRANCH  
CHARITY SHOP SUPERVISOR



**THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.**

To apply for this post please complete this application form and return it to us at  
RSPCA WEST DORSET BRANCH, PO BOX 5460, WEYMOUTH, DT3 6WH

## Section 1 Personal details

|   |     |                          |                             |
|---|-----|--------------------------|-----------------------------|
| Title:  |     | Last Name:               |                             |
| First Names:  |     |                          |                             |
| Address:  |     |                          |                             |
|   |     |                          |                             |
|   |     |                          |                             |
| Postcode:   |     |                          |                             |
| Home Telephone Number:  |     |                          |                             |
| Mobile Telephone Number:  |     |                          |                             |
| E-mail address:   |     |                          |                             |
| Date of birth   |     |                          |                             |
| Nationality   |     |                          |                             |
| Are you eligible to work in the UK? <small>In order to comply with the Asylum and Immigration Act 1996, any offer of employment will be subject to provision of documentation showing your entitlement to work in this country.</small> | Yes | <input type="checkbox"/> | No <input type="checkbox"/> |
| Do you hold a full UK driving license?  | Yes | <input type="checkbox"/> | No <input type="checkbox"/> |

## Section 2 Rehabilitation of Offenders Act 1974

Do you have any unspent convictions under the above mentioned act? Yes  No

If yes, please request a confidential criminal convictions form by emailing [mail@westdorsetrspca.org](mailto:mail@westdorsetrspca.org) or by writing to the po box address. The information provided will be treated in the strictest confidence. A person's criminal record will not, in itself, debar that person from being offered employment. Suitable applicants will not be refused posts because of offences which are not relevant to, and do not place them at or make them a risk in, the role for which they are applying.

## Section 3 Health

|  |  |
|--|--|
| Number of days sick absence taken in the last 2 years:             |  |
| Please state number of spells of sick absence in the last 2 years: |  |

## Section 4 Education and training details

| <b>Date</b> | <b>Name of school / provider</b> | <b>Examinations / training undertaken and qualifications gained (with grades)</b><br><b>Please include also details of any relevant courses completed and certificates held</b><br><b>Please also give details of any professional qualifications and membership of any professional bodies, where relevant.</b> |
|-------------|----------------------------------|--|
|-------------|----------------------------------|--|

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## Section 5 Employment Record

Please list chronologically, starting with current or last employer

| Name and Address of Employer | Date From: | Date To: | Job Title/Job Function/ Responsibilities: | Reason for Leaving or wishing to leave |
|------------------------------|------------|----------|---|--|
|------------------------------|------------|----------|---|--|

|  |  |  |  |  |
|--|--|--|--|--|
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## Section 6 Personal Statement

Please tell us why you're interested in this position and what knowledge, skills and attributes you'd bring to the job. Please include details of your hobbies and interests, any voluntary / charity work undertaken and any evidence of your interest in animals / animal welfare. Please continue on a separate sheet if necessary.

## Section 7 References

Please give the names and addresses of your two most recent employers (if applicable) and of two personal / character referees. (NB. References will only be taken if you commence employment with us)

### Reference 1 - EMPLOYER

|                             |                            |                          |
|-----------------------------|----------------------------|--------------------------|
| Name:                       | <input type="text"/>       |                          |
| Their Position (job title): | <input type="text"/>       |                          |
| Work Relationship:          | <input type="text"/>       |                          |
| Organisation:               | <input type="text"/>       |                          |
| Dates Employed:             | From: <input type="text"/> | To: <input type="text"/> |
| Address:                    | <input type="text"/>       |                          |
|                             | <input type="text"/>       |                          |
|                             | <input type="text"/>       |                          |
| Postcode                    | <input type="text"/>       |                          |
| Telephone Nº:               | <input type="text"/>       |                          |
| E-mail:                     | <input type="text"/>       |                          |

### Reference 2 - EMPLOYER

|                             |                            |                          |
|-----------------------------|----------------------------|--------------------------|
| Name:                       | <input type="text"/>       |                          |
| Their Position (job title): | <input type="text"/>       |                          |
| Work Relationship:          | <input type="text"/>       |                          |
| Organisation:               | <input type="text"/>       |                          |
| Dates Employed:             | From: <input type="text"/> | To: <input type="text"/> |
| Address:                    | <input type="text"/>       |                          |
|                             | <input type="text"/>       |                          |
|                             | <input type="text"/>       |                          |
| Postcode                    | <input type="text"/>       |                          |
| Telephone Nº:               | <input type="text"/>       |                          |
| E-mail:                     | <input type="text"/>       |                          |

### Reference 1 – PERSONAL REFEREE

|                             |                      |  |
|-----------------------------|----------------------|--|
| Name:                       | <input type="text"/> |  |
| Their Position (job title): | <input type="text"/> |  |
| Relationship to yourself:   | <input type="text"/> |  |
| Address:                    | <input type="text"/> |  |
|                             | <input type="text"/> |  |
|                             | <input type="text"/> |  |
| Postcode                    | <input type="text"/> |  |
| Telephone Nº:               | <input type="text"/> |  |
| E-mail:                     | <input type="text"/> |  |

### Reference 2 – PERSONAL REFEREE

|                             |                      |  |
|-----------------------------|----------------------|--|
| Name:                       | <input type="text"/> |  |
| Their Position (job title): | <input type="text"/> |  |
| Relationship to yourself:   | <input type="text"/> |  |
| Address:                    | <input type="text"/> |  |
|                             | <input type="text"/> |  |
|                             | <input type="text"/> |  |
| Postcode                    | <input type="text"/> |  |
| Telephone Nº:               | <input type="text"/> |  |
| E-mail:                     | <input type="text"/> |  |

## Section 8 Availability

Please indicate below any days when you would NOT be available for work during a normal week. Although this application is for a vacancy on two fixed days each week you will be required to occasionally cover for your colleagues who take leave on other days.

|  |
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## Section 8 Declaration

I confirm that the details I have provided on this form are correct to the best of my knowledge and I understand that any contract of employment will be jeopardised if I have misrepresented or omitted any relevant information. I understand if I am appointed information divulged in applications and forms for employment may be kept on file (both manual and computer) for recruitment, monitoring and employment purposes only.

RSPCA WEST DORSET BRANCH undertakes that it will treat any personal information that you provide to us, or that we obtain from you, in accordance with the requirements of the Data Protection Act 1998.

- Application forms by unsuccessful applicants will be shredded within 6 months.
- Application forms by successful applicants will be retained throughout the period of employment with the branch.

I consent that if I am the successful candidate I may be subject to a health assessment as a condition of employment

|  |                 |  |              |  |
|--|-----------------|--|--------------|--|
|  | <b>*Signed:</b> |  | <b>Date:</b> |  |
|--|-----------------|--|--------------|--|

(\*Can be signed at interview if sending application by email.)

To apply for this post please complete this application form and return it to us at the below address.

**PLEASE DO NOT SEND BY SIGNED FOR OR RECORDED DELIVERY – WE CANNOT ACCEPT THESE AT OUR PO BOX ADDRESS**

Application forms may also be submitted via email to [mail@westdorsetrspca.org](mailto:mail@westdorsetrspca.org)

**RSPCA WEST DORSET BRANCH, PO BOX 5460, WEYMOUTH, DT3 6WH**

For any queries, please email [mail@westdorsetrspca.org](mailto:mail@westdorsetrspca.org)