**Coversure Insurance Services Group**

**Job Application Form**

Please return this form to HR, The Coversure Group, Coversure House, Washingley Road, Huntingdon, Cambs, PE29 6SR or by email: [hr@coversure.co.uk](mailto:hr@coversure.co.uk)

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| **VACANCY DETAILS** | |
| Post applied for: | Ref no: |
| Where did you hear about this post? | |

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| **PERSONAL DETAILS** | | | | |
| Title: | First Name: | | | Surname: |
| Address and postcode: | | Email Address: | | |
| Mobile Telephone No: | | |
| Home Telephone No: | | |
| Availability to start work: | | | | |
| Do you hold a full driving licence? Yes  No | | | Do you have use of a car? Yes  No | |
| Current/Most recent salary? | | | Salary expectations? | |

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| **ARRANGEMENTS FOR INTERVIEW** |
| If you have a disability are there any arrangements which we can make for you if you are called for an interview and/or work-based exercise?  Yes  No  If Yes, please specify (eg. ground floor venue, sign language interpreter, audio tape etc) |

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| **PRESENT OR MOST RECENT EMPLOYMENT** | |
| Job Title: | Company: |
| Date Started: | Date left (if applicable): |
| Reason(s) for leaving: | |
| Main Duties and Responsibilities: | |

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| **PREVIOUS EMPLOYMENT HISTORY** | | | | |
| Company name and location | From | To | Job Title and Main Duties | Salary |
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| **SECONDARY, FURTHER AND HIGHER EDUCATION** | | | |
| Establishment name and location | From | To | Examinations Taken (include date, level and grade) |
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| **TRAINING AND DEVELOPMENT (Include job related activities relevant to your application)** | | | |
| Provider name and location | From | To | Examinations/Courses taken including levels/grades |
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| **MEMBERSHIP OF PROFESSIONAL ORGANISATIONS** | | | |
| Professional Organisation | Level of Membership | By Examination (Y/N) | Date Awarded |
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| **SUPPORTING STATEMENT** |
| Please use this section to provide further information in support of your application. This needs to be related to the requirements of the job and should include any relevant experience, knowledge and skills you consider make you a suitable candidate for the role and your reasons for applying. |
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| **ADDITIONAL INFORMATION** | |
| Do you know an existing member of the Coversure Group staff? | Yes  No |
| If Yes, whom? | |
| Will this be your only employment? | Yes  No |
| Do you have any criminal convictions **not yet spent** under the Rehabilitation of Offenders Act 1974? | Yes  No |
| If Yes, please give details below of offences, sentences and dates. | |
| Do you have any bankruptcy judgements against you? | Yes  No |
| Do you have any involvement in any regulatory investigations? | Yes  No |
| If Yes, please give details below (attach additional sheets if required). | |

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| **REFERENCES** | |
| Please give **two** referees. One should be your present employer, or if you are currently unemployed, your last employer, or if you are leaving full-time education, your Head teacher or College Principal. The second should be a person who can comment on your skills and abilities in relation to the job you have applied for (please note this should not be a member of your family). Please ensure that the two referees are not from the same company. | |
| Name: | Name: |
| Job Title: | Job Title: |
| Organisation: | Organisation: |
| Relationship: | Relationship: |
| Telephone No: | Telephone No: |
| Email address: | Email address: |
| Address and Postcode: | Address and Postcode: |
| (I do not wish this reference to be taken up prior to interview) | (I do not wish this reference to be taken up prior to interview) |

**DECLARATION**

I declare to the best of my knowledge, that the information given in this application is complete and correct. I understand that if, after appointment, any information is found to be inaccurate this may lead to dismissal without notice. I also understand that any offer of employment is subject to the receipt of satisfactory references.

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| Signature | Date |