Ref .....

JOHN MUIR TRUST

# Job application form

Position being applied for:
Initial(s) & surname:

## **CURRENT EMPLOYER**

Name & address of current employer:

Position held:

Key responsibilities:

Minimum notice period required by your employer:

Reason for leaving:



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FULL EMPLOYMENT HISTORY – please state your most recent employment first			
Previous employer(s) and job title:	Dates of employment:	Reason for leaving:	



## Job application form (continued)

Office use only:

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### SUITABILITY FOR POST

Please explain below how your skills and attributes, experience, personal qualities and any major achievements match those needed for this job. Refer to the essential and desirable criteria specified in the job description. If necessary, please continue on a separate sheet and attach to this.

#### **OTHER INTERESTS**



# Job application form (continued)

Office use only:

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EDUCATION & QUALIFICATIONS			
Location	Dates attended	Subject(s) & result(s)	
Secondary school			
Higher education			
University degree(s)			
Professional qualification(s)			
Other qualifications/ certificates relevant to the post (please refer to the job description for further information)			
Do you have a full UK driv	ring licence? YES	NO 🗌	

The John Muir Trust is a Scottish Charitable company limited by guarantee. Charity No.SC002061 Company No. SC081620. Registered office: Tower House, Station Road, Pitlochry PH16 5AN



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#### REFERENCES

The John Muir Trust will obtain two references before making appointments. One of your referees would normally be expected to be your present (or most recent) employer. If this is not the case, please state the reason. Please identify a second referee who may have closer knowledge of your character, and who is in a position to offer opinion on your suitability for this post.

#### You should not use family members or friends.

References will only be taken up for Preferred Candidates following interview and a verbal offer of employment.

Our pre-employment screening may include, where appropriate, health and fitness for work, criminal records, qualifications and professional registration.

Name:	Name:
Address:	Address:
Daytime telephone:	Daytime telephone:
Email address:	Email address:
This person's relationship to you:	This person's relationship to you:

#### **RELATIONSHIP WITH THE TRUST**

Please specify below any member of your immediate family who is currently, or has previously been, closely connected with the John Muir Trust (whether as an employee, volunteer, Trustee, contractor etc). Please state your relationship to them and a description of their involvement with the Trust: