



the home of golf®

Position applied for:	
Return completed form to:	HR Department, Pilmour House, St Andrews, Fife, KY16 9SF.

Employment history

Job Title:			
Employer:			
Date Started:			
Salary and benefits:			
Main duties and responsibilities:			
Previous posts (please start with the most recent):			
Job title:	Employer:	Dates (from-to):	Salary:

Education/training

Secondary education:	Dates attended:	Qualifications/grade:
Further/higher education:	Dates attended:	Qualifications (with date)/grade:

Are you undertaking any course of study at present? (if so, please give details)		
Do you have membership of any professional bodies? (if so, please give details, including any offices held)		
Supporting information Please give any details you feel are relevant in support of your application, including why you are interested in this post. Use additional sheets if necessary.		
Other details		
What is the notice required in your present post?		
Is your present post your sole regular employment?	Yes	No
Are you a British subject or a national of any EU country?	Yes	No
If not, do you have the right to work in the UK and a current work permit?	Yes	No
If so, please state the expiry date of your right to work in the UK and/or your work permit.		
Do you have a full driving licence?	Yes	No
Do you have any current endorsements?	Yes	No
Do you have use of a car?	Yes	No
Where did you see the advertisement for the post?		
Disabilities		
Do you require any special arrangements to be made for your interview on account of a disability?	Yes	No
If 'yes', please give brief details of the effects of your disability on your day-to-day activities, and any other information that you feel would help us to accommodate your needs during your interview and thus meet our obligations under the Equality Act 2010:		
Convictions		
Have you ever been convicted of a criminal offence? If so please give details of any unspent convictions. Spent convictions do not have to be declared as the job is not one covered by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.		

References

Please give the details of two referees, stating how long you have known them. (One should be your current or most recent employer).

1. Name:	2. Name:
Address:	Address:
Telephone number:	Telephone number:
Occupation:	Occupation:
Time known:	Time known:
Employer or Personal Reference:	Employer or Personal Reference:
May references be taken up before interview?	May references be taken up before interview?
YES/NO	YES/NO

Data protection

Information from this application may be processed for purposes registered by the Employer under the Data Protection Act 1998. Individuals have, on written request [on payment of a fee] the right of access to personal data held about them.

I hereby give my consent to St Andrews Links processing the data supplied in this application form for the purpose of recruitment and selection. Any false, incomplete or misleading statements may lead to dismissal.

Declaration

I declare that the information given in this application is to the best of my knowledge complete and correct. I understand that St Andrews Links reserves the right to withdraw an offer of employment or to terminate any employment already commenced if the information given by me is inaccurate or misleading. I also understand that any offer of employment is subject to references satisfactory to St Andrews Links.

Signed:

Date:



the home of golf®

Personal Details

Title:	
Surname:	
Forenames:	
Current address:	
Post Code:	
Home telephone number:	
Mobile telephone number:	
Email address:	
National Insurance number:	



Equal opportunities monitoring form

We are committed to ensuring that all job applicants and members of staff are treated equally, without discrimination on the grounds of gender, sexual orientation, marital or civil partner status, gender reassignment, race, colour, nationality, ethnic or national origin, religion or belief, disability or age. This form is intended to help us maintain equal opportunities best practice and identify barriers to workforce equality and diversity.

Please complete this form and return it with your application. The form will be separated from your application on receipt. The information on this form will be used for monitoring purposes only and will play no part in the recruitment process.

All questions are optional. You are not obliged to answer any of these questions but the more information you supply, the more effective our monitoring will be. All information supplied will be treated in the strictest confidence. It will not be placed on your personnel file.

ABOUT THE VACANCY

Please state which job you have applied for and the closing date given for applications.

Job applied for:	
Closing date for applications:	

Where did you hear about this job (please tick)?

Newspaper (please specify)	<input type="checkbox"/>	Friend	<input type="checkbox"/>	Recruitment company	<input type="checkbox"/>
Company website	<input type="checkbox"/>	Other (please specify)	<input type="checkbox"/>		

GENDER

What is your gender (please tick)?

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

(If you are undergoing gender reassignment, please use the gender identity you intend to acquire.)

GENDER IDENTITY

Do you identify as transgender/transsexual?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

ETHNIC GROUP

How would you describe your nationality and/or ethnicity (please tick)?

A White:		B Mixed race:		C Asian:	
British - English, Scottish or Welsh	<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>	Indian	<input type="checkbox"/>
Irish	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Other White background	<input type="checkbox"/>	White and Asian	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
		Other Mixed background	<input type="checkbox"/>	Other Asian	<input type="checkbox"/>
D Black or Black British:		E Chinese and other groups:			
Caribbean	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
African	<input type="checkbox"/>	Other ethnic group	<input type="checkbox"/>		
Other Black background	<input type="checkbox"/>				

AGE

What is your age (please tick)?

16-17	<input type="checkbox"/>	18-21	<input type="checkbox"/>	22-30	<input type="checkbox"/>	31-40	<input type="checkbox"/>	41-50	<input type="checkbox"/>
51-60	<input type="checkbox"/>	61-65	<input type="checkbox"/>	66-70	<input type="checkbox"/>	71+	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>

SEXUAL ORIENTATION

How would you describe your sexual orientation (please tick)?

Heterosexual / straight	<input type="checkbox"/>	Bisexual	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Gay man	<input type="checkbox"/>	Gay woman / lesbian	<input type="checkbox"/>		

If you are lesbian, gay or bisexual, are you open about your sexual orientation?

	Yes	Partially	No
At home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With your manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At work generally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RELIGION OR BELIEF

Please describe your religion or other strongly-held belief.

I have no particular religion or belief	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

DISABILITY

The Equality Act 2010 defines a disability as a "physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities". An effect is long-term if it has lasted, or is likely to last, more than 12 months. Do you consider that you have a disability under the Equality Act (please tick)?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Used to have a disability but have now recovered	<input type="checkbox"/>	Don't know	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>		