

3. Employment History

Starting with your present post, list in reverse order all employment (please continue on a separate form if required).

Name and Address of Employer

From:

To:

Nature of Business:

Precise reasons for leaving or wishing to leave:

Brief description of your duties:

Name and Address of Employer

From:

To:

Nature of Business:

Precise reasons for leaving or wishing to leave:

Brief description of your duties:

Name and Address of Employer

From:

To:

Nature of Business:

Precise reasons for leaving or wishing to leave:

Brief description of your duties:

4. Convictions

Please give details of any criminal convictions or pending police action in the last ten years. If you have no convictions, please write "NONE".

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5. Regulator

Are you currently prevented from working for a financial services business by virtue of an order of the Jersey Financial Services Commission? *(Tick box as appropriate)*

Yes No

6. References

Please give names and addresses of two individuals from whom references may be requested. (One should be your current or most recent employer. The second should also be a previous employer or, if not applicable, a personal referee).

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|---------------|---------------|
| Name: | Name: |
| Relationship: | Relationship: |
| Position: | Position: |
| Address: | Address: |
| | |
| | |
| | |
| | |
| Email: | Email: |

7. Additional Information

Please use this space to insert any comments you may have or additional information that may be relevant to your application, e.g. fluency in second language.

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DECLARATION

I certify that the information in this application is true. I understand that this information may be verified as part of my application and that any resulting offer of engagement may be withdrawn on the grounds of its inaccuracy.

Here at Community Savings we take your privacy seriously. The information provided by you will only be used in relation to your application for volunteering and for reference thereto should you become a volunteer with Community Savings.

A copy of our Staff Privacy Policy is attached.

We would like to contact third party referees as given herein for which you hereby consent.

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| Signature: |
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| Date: |
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