

# JOB APPLICATION FORM

**This form must be completed in full in order for your application to be considered. We will require your signature at any subsequent interview.**

If you require Reasonable Adjustment in accordance with the Equality Act 2010 and need assistance in the application process or any subsequent interview process, or have any queries relating to this form, please contact Humphries Kirk Human Resources department on **01929 552141**.

## JOB ROLE

Job role sought:

Salary sought:

Notice period:

First available date for work:

Hours sought:

Full time

Part time

If part time, please detail which days/hours can you work below:

If you speak any other languages, please give details:

If you have any annual leave booked, please give details:

How did you hear about this role?

HK website

Other website

Job board

Agency

Please give details:

If recommended by one of our employees, or another individual, please give their name:

**For Secretaries and PA's.** Typing speed:

WPM

Has this been recently tested?

Yes

No

## PERSONAL INFORMATION

Full name:

Previous Surname /  
Also known as:

Address:



Email:

Tel Home:

Tel Mobile:

National  
Insurance No:

## TRANSPORT / CAR

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Do you have access to a vehicle for work? Yes  No

If you have any current, potential or pending endorsements, disqualifications, proceedings or fines, please give details below:

## RIGHT TO WORK IN THE UK

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Do you have the right to work in the UK? Yes  No

Do you have/require a work permit? Yes  No

If YES, when does it expire?

## DECLARATION SUBJECT TO THE REHABILITATION OF OFFENDERS ACT 1974

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Do you have any unspent criminal convictions? Yes  No

If YES, please give details below:

## PROFESSIONAL BODIES

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Are you are a member of any professional bodies? Yes  No

If YES, please give details below and give SRA roll number/ILEX membership number as applicable:

## PERSONAL DETAILS If you answer YES to any questions, please give details in the box on the right.

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Have you applied for employment here previously? Yes  No

Are you associated with/do you know any of our employees? Yes  No

If offered a role, do you intend to undertake any other part-time paid or unpaid work? Yes  No

Do you have any other business interests? i.e. director/shareholder of an organisation Yes  No

Do you hold any other positions of office? Yes  No

Have you ever been dismissed from employment? Yes  No

Have you previously left employment during or pending disciplinary action? Yes  No

Do you currently have any disciplinary live warnings?

Yes  No

To the best of your knowledge, has Humphries Kirk ever acted for or against either yourself or anyone that you know?

Yes  No

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#### Fee Earners Only

Are you or have you ever been, either in your capacity as an individual or Partner/Director Officer (or similar) in another organisation:

• the subject of any professional visit, investigation, disciplinary, tribunal or other proceedings from the SRA/CILEX/other governing or official bodies?

Yes  No

• subject to any Conditions, Findings, Orders or any other action?

Yes  No

• subject to any negligence claims?

Yes  No

• subject to any Restrictive Covenants in respect of your current/last contract that may affect you application/employment?

Yes  No

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#### Further Information

Is there any further information that you may like to disclose that could affect your application, references or any subsequent offer of employment? If so, please detail.

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#### QUALIFICATIONS

Qualification	Grade	Date Obtained

**EMPLOYMENT HISTORY SUMMARY – this must be completed in full**

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Start with the most recent employer, then work in reverse chronological order  
Please provide dates and details of any gaps in employment on the next page

Current/most recent employment

Current Employer:  Salary:  Start:  End:

Employer address:

Job title:

Responsibilities:

**Fee Earners only.** Target for last 12 months: £  Billed last 12 months: £

Reason for leaving: Resigned  Dismissed  Reason

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Previous employment

Employer:  Start:  End:

Employer address:

Job title and main responsibilities:

Reason for leaving: Resigned  Dismissed  Reason

Employer:  Start:  End:

Employer address:

Job title and main responsibilities:

Reason for leaving: Resigned  Dismissed  Reason

Employer:  Start:  End:

Employer address:

Job title and main responsibilities:

Reason for leaving: Resigned  Dismissed  Reason

Employer:  Start:  End:

Employer address:

Job title and main responsibilities:

Reason for leaving: Resigned  Dismissed  Reason

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Employer:  Start:  End:

Employer address:

Job title and main responsibilities:

Reason for leaving: Resigned  Dismissed  Reason

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Employer:  Start:  End:

Employer address:

Job title and main responsibilities:

Reason for leaving: Resigned  Dismissed  Reason

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Employer:  Start:  End:

Employer address:

Job title and main responsibilities:

Reason for leaving: Resigned  Dismissed  Reason

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Please provide details in the box below for any gaps in employment:

**EMPLOYMENT / ACADEMIC REFERENCES**

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**Please complete reference details in the boxes below:**

- We require references from your two most recent employers. If you have been employed by your current employer for 5 years or more, only 1 reference is required. Only the name of an HR Department contact or Senior Manager will be accepted.
- If you have graduated from university in the past year, or if you are applying for a Training Contract, then an academic reference is also required (see next page). The referee should be a member of the university's academic staff who knows you well enough to comment.

1. Current/most recent employer details

Name of HR contact or Senior Manager:

Job Title:

Email address:

Company name:  Telephone no.

Dates of employment: From  Until  May we apply for references prior to any offer of work? Yes  No

I agree for Humphries Kirk to obtain this employer reference once I have given permission for references to be sought

Signature:  Name:  Date:

2. Please state the previous to last employer details

Name of HR contact or Senior Manager:

Job Title:

Email address:

Company name:  Telephone no.

Dates of employment: From  Until  May we apply for references prior to any offer of work? Yes  No

I agree for Humphries Kirk to obtain this employer reference once I have given permission for references to be sought

Signature:  Name:  Date:

3. Academic Reference (if relevant)

Name of Academic Reference:

Title:   
*E.g. Personal Tutor, Academic Supervisor or Lecturer*

Email address:

University name:

University address:

University postcode:  Telephone no.

Dates of course: From  Until  May we apply for references prior to any offer of work? Yes  No

I agree for Humphries Kirk to obtain this academic reference once I have given permission for references to be sought

Signature:  Name:  Date:

**Please continue to the next page to sign the declarations and complete your application**

## DECLARATIONS



Please complete the following as relevant and sign electronically with your name. We will require your signature at any subsequent interview.

### DBS Checks

Due to the nature of our business, DBS checks maybe required for some roles. Please sign here to confirm your consent to enter into this process.

Signature:

Name:

Date:

### Personal Data

I agree to my personal data/relevant documentation being retained as long as reasonably necessary. I also agree that it be shared for the purpose of obtaining references once I have given permission for references to be sought.

Signature:

Name:

Date:

### Personality Profiling Questionnaire

You may be required to undertake an online assessment. In this case, we would need to submit your email address to the provider in order that they may send you the link to complete the questionnaire. Please sign to give permission to do so.

Signature:

Name:

Date:

### Declaration:

The information contained in this Application Form is true and accurate. If I have declared false information, I understand that this may result in any subsequent offer being withdrawn/employment being terminated without notice.

Signature:

Name:

Date:

### Land Lawyers (only)

I agree that you may share necessary personal data belonging to me with Lender Panels.

Signature:

Name:

Date:

### Qualified Fee Earners (only)

I confirm that I have a current Practising Certificate (Solicitor/CILEX/Licensed Conveyancer).

Signature:

Name:

Date:

### CILEX / Licensed Conveyancers (only)

I confirm that I give my permission for Humphries Kirk to gain information relating to my membership grade and dates, right to practice, any recorded conduct issues, orders, findings, conditions or similar.

Signature:

Name:

Date:

Membership no.

If you have any queries relating to this form, please contact our Human Resources department on **01929 552141**.