

## Training contract application form

### Personal Details

Title: (Mr/Mrs/Ms/Miss/Other)	First Name(s):	Surname:	
Nationality:		Will you require a work permit?	
Current university/college:	Graduation/course completion date:	Training contract to commence: (Date)	

### Higher Education

University/College:	Dates:	Course:	Grade achieved/ expected
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Please list all subjects taken to date and results and (if not taken) your final year subjects:

### Secondary/Further Education

School(s) or college(s):	Location:	Date attended from:	Date attended to:
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### A levels/AS levels/NVQs/or equivalent

Date taken:	Subject:	Level	Grade	UCAS Tariff

Any scholarships, awards or prizes won at school or university?

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**GCSEs/O levels**

Date taken	Subject	Level	Grade

**Achievements/interests**

What were your major achievements during your school/college years?

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How did you spend your leisure time during this period?

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What were your major achievements during your time at university/college?

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How did you spend your leisure time during this period?

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### Vacation and Other Employment

Name & location of employer	Nature of business	Dates from/to	Duties	Skills gained by employment

### Overseas travel

Location	Dates from/to	Reason for travel

### Other skills

Do you speak or write any foreign languages? If so, to what level of fluency?

IT skills and level of proficiency

Do you have a full driving licence?

Dates not available for interview, if any:

**Further information in support of your application**

Is there any other information you would like to give in support of your application? Please attach an additional sheet if necessary.

**Your contact details**

Title (Mr/Mrs/Ms/Miss/Other)	First name:	Surname:
Permanent address		Term-time address
Telephone: Email: Mobile: When can you be contacted at this address?		Telephone: Email: Mobile: When can you be contacted at this address?

**Qualification applying for:** *(Please circle below)*

Chartered Accountant	Accounting Technician	Other
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### References

We will require two referees; one academic and, if possible, you should include a previous employer.  
If choosing a personal referee, they should not be a relative.

Name	Name
Address	Address
Telephone:	Telephone:
Occupation:	Occupation

**How did you hear about Cassons? Please give details**

**Do you have any criminal convictions which are not regarded as spent under the Rehabilitation of Offenders Act 1974? (please tick)**

- ☐ Yes  
☐ No

**Are there any circumstances, of which we need to be aware, that may affect your attendance or timekeeping at work? Please give details**

### Declaration

I confirm that the above statements and information are true. I understand that I will be liable for dismissal if any information given is subsequently found to be deliberately misleading. I accept that I will be expected to produce certificates as evidence of my qualifications.

I consent to Cassons processing, by means of a computer database or otherwise, any information which I provide to them for the purpose of my application.

Signature:	Date:
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**Please return to Laura Braithwaite, Human Resources Manager at:  
Cassons business advisers LLP**

FREEPOST RRBK-EGJB-USEC  
St Crispin House  
St Crispin Way  
Haslingden  
Rossendale  
Lancashire  
BB4 4PW  
or email to [laura.braithwaite@cassons.co.uk](mailto:laura.braithwaite@cassons.co.uk)

## Equal Opportunities

Cassons is committed to promoting a diverse workforce and to active policies which eliminate unfair discrimination. Cassons do not discriminate on any grounds other than the ability to carry out the job. Monitoring is essential to ensure that the policies are being properly implemented and your answers to the questions below will provide statistical information that helps us evaluate our commitment to diversity.

This sheet will be detached before your application is considered. Any information given will be held in strict confidence and will not affect your application. We ask for your co-operation in completing this sheet.

<b>Job details</b> Post applied for Where did you hear about this vacancy?					
<b>Personal details</b> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-right: 1px solid black; padding: 5px;">           Last name             Mr / Mrs / Miss / Ms / Dr / other, please specify             Date of birth             Nationality         </td> <td style="width: 50%; padding: 5px;">           First name(s)             Gender             Age             Place of birth         </td> </tr> </table>				Last name  Mr / Mrs / Miss / Ms / Dr / other, please specify  Date of birth  Nationality	First name(s)  Gender  Age  Place of birth
Last name  Mr / Mrs / Miss / Ms / Dr / other, please specify  Date of birth  Nationality	First name(s)  Gender  Age  Place of birth				
<b>Which is your ethnic group?</b> Choose ONE section from A to E, then tick the appropriate box to indicate your cultural background.					
<b>A      White</b>  White British <input type="checkbox"/> White Irish <input type="checkbox"/> Any other White background <input type="checkbox"/>	<b>B      Mixed</b>  Mixed White and Black Caribbean <input type="checkbox"/> Mixed White and Black African <input type="checkbox"/> Mixed White and Asian <input type="checkbox"/> Any other Mixed background <input type="checkbox"/>	<b>C      Asian or Asian British</b>  Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Any other Asian background <input type="checkbox"/>			
<b>D      Black or Black British</b>  Black or Black British Caribbean <input type="checkbox"/> Black or Black British African <input type="checkbox"/> Any other Black background <input type="checkbox"/>	<b>E      Chinese or other ethnic group</b>  Chinese <input type="checkbox"/> Any other ethnic group <input type="checkbox"/> Please specify:				
<b>Do you consider that you have a disability?</b> Yes / No					
If 'Yes', please state the nature of the disability. Would you need any adjustments to be made to carry out this role?  Do you need any special assistance in attending interview? If so, please give details:  (The Disability Discrimination Act defines a disability as a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.)					
If you wish, you may disclose information about yourself in this section about your:  Religion  Sexual orientation					