

Application Information

Thank you for your interest in a position with Filmhouse.

We have no vacancies at present, but if you wish to complete this form stating any job you may be interested in, we will hold the form for two months and if any work becomes available that suits you and us, we may give you an interview. We will require to see, and copy, documentary proof of your identity and National Insurance number. If we offer you an interview, as a food handler, you will be required to complete a pre-employment medical questionnaire.

To apply you will need to complete the application form and equal opportunities monitoring form below. When doing so, please follow these introductions:

- Please ensure you complete all parts of the application form as fully as possible.
- In the supporting statement of the application form, please include why you are interested in this post and what skills and experience you will bring to the role.
- · Please do not attach a C.V.
- You application should be posted or emailed to:

Robert Howie Head of Customer Experience Filmhouse, 88 Lothian Road, EDINBURGH, EH3 9BZ

roberth@filmhousecinema.com

• We regret that we are unable to contact all applicants, so if you have not heard anything from us within 3 months then you must assume that your application has been unsuccessful.

Application for Employment (Confidential)

Position applied for:								
Date:								
PERSONAL DETAILS								
FLIXON	IAL DETAIL	.5						
Title	Surna	ne		Forename	(s)			
Address				_				
				Postcode				
Telephone number (day)			Telephone number (evening)					
Email add	dress							
EDUCAT	TON							
Secondar	ry Education	(na	me/place)	Qualifications / grades achieved				
Further/higher Education (name/place)				Qualificatio	ns / grades	achieved		
OTHER TRAINING / QUALIFICATIONS								
Please provide details of any other relevant training, professional qualifications or work related skills you hold or are studying towards (e.g. languages, I.T. qualifications).								

EMPLOYMENT HISTO separate sheet if nec		al order, most rec	ent first. Please continue on a				
Job Title		Employer					
Dates of employment (from – to)		Salary / hourly rate					
Main duties / responsibilities							
Reason for leaving (if no longer employed)							
PAST EMPLOYMENT							
Job Title		Employer					
Dates of employment (from – to)		Salary / hourly rate					
Main duties / responsibilities							
Reason for leaving (if no longer employed)							
PAST EMPLOYMENT							
Job Title		Employer					
Dates of employment (from – to)		Salary / hourly rate					
Main duties / responsibilities							
Reason for leaving (if no longer employed)							

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		sary					
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ENERAL							
ENERAL ave you ever worked for Filmlefore?	house/EIFF						
ave you ever worked for Filml	house/EIFF						
ave you ever worked for Filmlefore?							

REFERENCES (WORK OR EDUCATION RELATED)								
1. NAME				2. NAME				
OCCUPATION			OCCUPATION					
ADDRESS			ADDRESS					
TELEPHONE NUI	MBER			TELEPHONE NUMBER				
TIME KNOWN				TIME KNOWN				
TYPE OF REF:	Work / Education			TYPE OF REF: Work / E			Education	
May references be taken up prior to a job offer being made?			YES / NO	May references be taken up prior a job offer being made?			r to	YES / NO
DATA PROTECTION DECLARATION								
I hereby give my consent to Filmhouse processing the data supplied in this application form for the purpose of recruitment and selection.								
I declare that the information given in this application is, to the best of my knowledge, complete and accurate.								
Applicant's signature: Date:								
Please note: any false, incomplete or misleading statement may result in withdrawal of a job offer or dismissal.								



88 Lothian Road Edinburgh | Box Office 0131 228 2688 | www.filmhousecinema.com

Equal Opportunities Monitoring Form

Filmhouse strives to be an equal opportunities employer. In order to assess how successful our equal opportunities policy is we have set up a system of monitoring all job applications. We would therefore be grateful if you would complete the questions on this form.

All information will be treated in confidence and will not be seen by staff directly involved in the appointment. The questionnaire will be detached from your application form, stored separately and used only to provide statistics for monitoring purposes. Thank you for your assistance.

Sex	☐ Male ☐ Fe	male		Age	
Marital status	☐ Single	☐ Married / Civil P	eartnership □ Divorced □ Living with partner		
Do you consid	der yourself to	have a disability?		Yes	□ No
Please descril by ticking the	f your disability ox or boxes	☐ Visuall	y Impaired	□ Other Mobility□ Learning Difficulites□ Other Disability	
If you have special requirements relating to your disability please note them here					

Ethnic Group (please choose ONE section from A to E, then tick the appropriate box to indicate your cultural background)			
A	White □ British □ Irish □ Any other White background: (Please specify)	В	Mixed ☐ White and Black Caribbean ☐ White and Black African ☐ White and Asian ☐ Any other mixed background: (Please specify)
C	Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background: (Please specify)	D	Black or Black British ☐ Caribbean ☐ African ☐ Any other Black background: (Please specify)
	Chinese, or other ethnic group Chinese Any other background: (please specify) tablish whether or not our recruitment adverse cost effective will you please state below h		