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APPLICATION FORM: EXAMINATION INVIGILATOR

Thank you for your interest in becoming an invigilator at the University of Southampton. In order to process your application, please submit it via e-mail Invig@southampton.ac.uk

Personal details		
Title (delete as appropriate):	Last name	First name
Mr/Mrs/Ms/Dr/Rev/other		
Phone - mobile		
Phone - home		
E-mail		
Address including post code		
NI number		
Date of birth (DD/MM/YYYY)		
CV attached?	Yes/No	
Are you interested in the Team Leader post? (You must have relevant experience previously, other institutions accepted)	Yes/No	

Please give an example of a previous role where you have worked within standard policies and procedures to deliver?

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Please outline how your skills and experience matches the job description and person specification?

In terms of customer service, please give an example where you have demonstrated excellent communication or problem resolution?

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Can you remember when you last studied and completed professional assessment, what was your personal exam experience?

Can you give an example of what you like to see in a good team? What does 'good team player' mean to you?

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References	
Please give one professional referee from whom a reference may be sought if you are offered the post	
Name	Address
Phone number	E-mail
Capacity in which known to you	

Criminal convictions
Have you ever been convicted of a criminal offence? (You are not required to detail spent convictions). Click on one of the boxes to select Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, please give details on separate sheet and submit with your application

Declaration
I declare that I have read the role description(s) and essential criteria, and that I am able to fulfil them as required. Click on the box to confirm <input type="checkbox"/>
I declare that the information contained in this application is correct to the best of my knowledge. Click on the box to confirm <input type="checkbox"/>
I understand that I will need to prove my right to work in the UK and complete a confidential Health Declaration form. Click on the box to confirm <input type="checkbox"/>
In accordance with the Data Protection Act 1998, the information you provide on this form will be saved in our database and will not be released to any third party. If you do not continue with your application, or if you stop working as an invigilator, this information will be destroyed within 6 months.

Once your application and been received we will reply to confirm if you have been successful or not for interview. This may be 2-4 weeks from application, as we work through the applicants and schedule interview sessions.

We anticipate interview dates as below, if you have any preferences or exemptions please make this known in the text box below.

Interview Date	AM available Yes/No	PM available Yes/No
Monday 11 October		
Wednesday 13 October		No interview scheduled
Wednesday 20 October		
Friday 22 October		
Wednesday 27 October		