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| **Personal Details** |
| **Full Name:** |  |
| **Address:** |  |
| **Postcode:** |  |
| **Email Address:** |  |
| **Phone Number:** |  |
| **University:** |  |
| **Course:** |  |
| **Predicted Grade:** |  |
| **PLEASE SUBMIT A COPY OF YOUR CV WITH THIS FORM** |
| Please provide a personal statement of 250 – 500 words describing why you would like to work for ERS. In your response please include your understanding of the company’s financial outputs and product developments |  |
| Technology, data and new entrants are driving seismic changes in the UK motor insurance industry. In 250 – 500 words, tell us what you think the main challenge and opportunities will be in motor pricing over the next 5 years |  |
| In 250 – 500 words, can you please tell us what interests you about an Actuarial career path? |  |
| **Additional information**  |  |
| Do you require a visa to work in the UK? | Yes [ ]  No [ ]  |
| Do you consider yourself to have a disability as defined in the Equality Act 2010? | Yes [ ]  No [ ]  |
| Are you currently subject to any unspent criminal convictions?  | Yes [ ]  No [ ]  |
| Do you currently have any outstanding CCJs? | Yes [ ]  No [ ]  |

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| **GDPR/Future Employee Declaration** |
| The HR Department will pass this application to key personnel involved in the recruitment process. In all instances, we take steps to ensure that an adequate level of protection is given to your information. This form will be destroyed if your application is unsuccessful. If your application is successful, this form will be used to commence your pre-employment checks and will be shared with our third party provider Giant Employment Screening. **Declaration**I declare that the information that I have provided is true and accurate and that I have not omitted any material facts that may have a bearing on my future employment.I understand that my contract of employment with the Company will be made on the basis of the information I have provided and that a false declaration will render me liable to dismissal.Yes [ ]  No [ ] Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |