Shortlist and interview details form

Please complete and send back to MHR (elmbridge.hr@mhr.co.uk), together with your scored shortlisting form and all the application forms. For any queries, please phone MHR on 0115 977 6804.

Details of post

**Post title:**

**Post number:**

Details of interview

**Location:**(interview room to be arranged by department

**Day and date:**

**Interview panel:**

**Are candidates required to complete a test or presentation?**

Test Presentation None

**If applicable, please provide details of the type of test/requirements of presentation:**

**How long will the interview (and test if applicable) last?**

Details of candidates and interview times

**Would you like candidates to select their own interview time based on those provided below?**

Yes No

NB: If no, please list the candidate’s name beside the interview time you would like them to attend.

Please list the time you would like the candidate to arrive at the location of the interview.

|  |  |  |
| --- | --- | --- |
| **Candidate name** | **Test time** | **Interview time** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Special arrangements

**Name of the person for reception to contact on interview day.**

Name: Ext no:

NB: The department will need to inform reception of interview dates and times.

**Print name:**

**Signed:**

**Date:**