**Application Process**

1 Please complete **all sections** of this application form.

2 Please provide a **CV** **to be attached** to your completed application.

3 Please provide the names of two referees that we may contact.

|  |  |
| --- | --- |
| **Job Title of Vacancy** |  |
| **Surname** |  |
| **Other Names** |  |
| **Title** |  |
| **Home Address** |  |
| **Postcode** |  |
| **Contact Details** |  |
| * **Telephone No:** |  |
| * **Mobile No:** |  |
| * **Email:** |  |
| **Education and Training** |  |
| **Details and Results of Any Examinations Taken** |  |
| **Further Education (College, University)** |  |
| **Short Courses** |  |

|  |  |
| --- | --- |
| **Employment History** | **1) Present Employer**  **Address:**  **Postcode:**  **Job Title:**  **Duties:**  **Date Employed: From**.       **To:**  **Reason for Leaving**:  **Basic Pay**:  **2) Previous Employer**  **Address:**  **Postcode:**  **Job Title:**  **Duties:**  **Date Employed: From**.       **To:**  **Reason for Leaving**:  **Basic Pay**: |
| **Declaration of Interest**  Do you have any business or personal interests that might be relevant to the work of Engaging Communities Solutions, which could lead to a real or perceived conflict of interests were you to be appointed? (Failure to disclose such information could result in an appointment being terminated.) | |
|  | ***Please indicate:*** Yes  No |
| If yes, please give further details: |  |

**No approach will be made to your present employer before an offer of employment is made to you.**

Please tell us about other jobs you have done and about the skills you used and/or learned in those jobs, setting out how you meet the essential criteria as set out in the person specification.

Please tell us why you applied for this job and why you think you are the best person for the job.

Have you ever been convicted of a criminal offence? Yes  No

This does not apply to convictions which are spent.

*(Declaration subject to the Rehabilitation of Offenders Act 1974)*

If you have a disability please tell us about any adjustments we may need to make to assist you at interview

Please tell us if there are any dates when you will not be available for interview

**Referee 1**

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Postcode |  |
| Tel No |  |
| E-mail |  |
| How do you know him / her? |  |

**Referee 2**

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Postcode |  |
| Tel No |  |
| E-mail |  |
| How do you know him / her? |  |

**Note that referees need to be someone who has known you for some time in a professional capacity and one must be from your most recent employer.**

We place a great deal of importance on the security and privacy of any personal information we have in our possession and in order to comply with current data protection legislation, we will retain your personal data in line with our Privacy Notice. Please refer to this for further details.

**I can confirm that to the best of my knowledge the above information is correct. I accept that providing deliberately false information could result in my dismissal.**

Signature      ..................................... Date      ………......................

**Equal Opportunities Monitoring Form**

We are an equal opportunities employer and will aim to ensure that all applicants, employees and workers are treated with respect irrespective of their sex, marital or civil partnership status, sexual orientation, gender reassignment, race, colour, ethnic or national origins, religion or belief, disability or age (“the Protected Characteristics”).

The information collected on this form is confidential and willbe used to monitor the application of the Company's Equal Opportunities Policy. This information is requested on a separate form and it will not be seen or made known to selector.

**Please mark the following boxes with a tick and delete any words as appropriate.**

|  |  |
| --- | --- |
| **Job Title:** |  |
| **Location:** |  |
| **Full name:** |  |
| **1. Gender:**  MALE / FEMALE | |
| **2. Age** |  |
| **3. Marital status:**  MARRIED / SINGLE / OTHER | |
| **4. Do you have responsibility for dependants? (Dependants relates to children, or elderly or other persons for whom you are the main carer.)**  YES / NO | |
| **5. Do you have any disabilities?**  YES / NO | |

|  |  |
| --- | --- |
| **6. Ethnic origin** (Relates to a sense of identity/belonging on the basis of race/culture).  I would describe myself as (choose ONE section from A to E, and then tick the appropriate box to indicate your cultural background): | |
| **A White:** | |
| British |  |
| English |  |
| Scottish |  |
| Welsh |  |
| Irish |  |
| Other, please specify: |  |
| **B Mixed:** | |
| White and Black Caribbean |  |
| White and Black African |  |
| White and Asian |  |
| Other, please specify: |  |

|  |  |
| --- | --- |
| **C Asian, Asian British, Asian English, Asian Scottish or Asian Welsh:** | |
| Indian |  |
| Pakistani |  |
| Bangladeshi |  |
| Other, please specify: | |
| **D Black, Black British, Black English, Black Scottish, or Black Welsh:** | |
| Caribbean |  |
| African |  |
| Other, please specify: |  |
| **E Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh, or other ethnic group:** | |
| Chinese |  |
| Other, please specify: |  |
| 7. Where was this post advertised? | |

We place a great deal of importance on the security and privacy of any personal information we have in our possession and we will retain your personal data in line with our Privacy Notice. Please refer to this for further details.

Thank you for your assistance.

Signature      .................................................. Date      …………......................