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| **APPLICATION FOR EMPLOYMENT** |

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| Occupational Requirement (Equality Act 2010, Schedule 9, Part 1) applies to this post.  |

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| **PRIVATE AND CONFIDENTIAL**For your application to be considered it is essential that you complete the relevant sections of this form. **Separate application forms must be used if applying for more than one post.**Return this form to: My Sisters Place 123 Borough Road Middlesbrough TS1 3ANEmail to: recruitment@mysistersplace.co.uk **POSITION APPLIED FOR:** |

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| **Personal Details**  |

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| --- | --- |
| Surname:Forename:Title:Address:Postcode: | Telephone Number:E mail:NI Number:Current driving licence? Yes/NoAre there any restrictions on you taking up employment in the UK? Yes/No(If yes, please provide details) |

**Where did you hear about this vacancy? (Please delete as necessary)**

Website Sector1 MVDA

Women’s Aid Social Media Word of Mouth

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| **Education / Qualifications**  |

|  |  |  |
| --- | --- | --- |
| Schools  | Dates | Qualifications gained |
|  |  |  |
| Colleges/Universities | Dates | Qualifications gained |
|  |  |  |
| Other training |
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| **Present Employment**  |

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| Post Title Salary |
| Employer |
| Number of Years in Post |
| Main Duties and Responsibilities (in brief)  |

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| **Employment History** (Please complete in full and include any voluntary experience). |

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| --- | --- | --- | --- |
| **Name and Address of Employer** | **Job Title and Duties** | **Rate of Pay** | **Start and end date** |
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| Notice required in current post: |

**Leisure**

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| Please note here your leisure interests, sports and hobbies, other pastimes etc |

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| **General Comments** |

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| Please detail here your reasons for this application, your main achievements to date and the strengths you would bring to this post. Specifically, please detail how your knowledge, skills and experiences meet the requirements of this role (as summarised in the person specification).  |

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| **Criminal Record** |

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| Please note any criminal convictions except those ‘spent’ under the Rehabilitation of Offenders Act 1974. If none please state. In certain circumstances employment is dependent upon obtaining a satisfactory basic disclosure from the Criminal Records Bureau/Disclosure Scotland. |

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| **References**  |

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| **Please provide the names and email addresses of two people who we can contact to obtain employment references, one of which must be your most recent employer.**  |
| 1.Email:  | 2.Email |

**Declaration** (Please read this carefully before signing this application)

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| 1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. I agree that the organisation reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor). I agree that this information will be processed in accordance with the Data Protection Act.
3. I agree that should I be successful in this application, I will, if required, apply to the Criminal Records Bureau/Disclosure for Scotland for a basic disclosure. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the company any offer of employment may be withdrawn or my employment terminated.

Signed: ......................................................... Date: .................................... |

**Recruitment Monitoring Form**

**Sex Discrimination Act 7 (2) (e) applies**

Consideration will be given to all suitably experienced and qualified applicants; in order to help us monitor this please complete the details below. The information you provide will be used solely for statistical analysis and will be treated as strictly confidential.

You are asked to fold the sheet and return it with your application form. On receipt it will be separated before consideration of candidates takes place.

Thank you for your assistance.

|  |  |
| --- | --- |
| Post Title: | Where did you see this post advertised? |

**Please tick the appropriate boxes:**

*I AM*

Female **□** Do you consider yourself to be Disabled? **□**

*MY ORIGIN IS:*

White □ Irish □

Black-African □ Black Caribbean □

Black – Other (Please specify) ……………………………………………

Indian □ Pakistani □

Bangladeshi □ Chinese □

Other (please specify) …………………………………………………….