APPLICATION FOR EMPLOYMENT

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| Occupational Requirement (Equality Act 2010, Schedule 9, Part 1) applies to this post which is only open to female applicants. WWIN will afford equal opportunity in all aspects of employment, irrespective of disability, race, religion, age, sexuality or marital status. | | | | | | | | | | | |
| **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.** | | | | | | | | | | | |
| Post/By Hand form to: | | | Wearside Women in Need  4-6 Mary Street  Sunderland  SR1 3NH | | | | | | | | |
| Email form to: | | | [**amy.rossiter@wwin.org.uk**](mailto:enquiries@wwin.org.uk) | | | | | | | | |
| **Position Applied For:** | | | |  | | | | | | | |
| **PERSONAL DETAILS** | | | | | | | | | | | |
| **First name:** |  | | | | | | **Surname:** | |  | | |
| **Title:** |  | | | | | | **NI Number:** | |  | | |
| **Address:** |  | | | | | | | | | | |
|  | | | | | | **Postcode:** | |  | | |
| **Tel No:** |  | | | | | | **Mobile No:** | |  | | |
| **Email:** |  | | | | | | | | | | |
| **Current Driving Licence:** | | | | |  | | | | | | |
| **Are there any restrictions on you taking up employment in the UK?**  If “Yes” please provide details | | | | | | | | | | | **Yes/No** |
| **EDUCATION/QUALIFICATIONS – Please add extra rows if required** | | | | | | | | | | | |
| **School** | | | | | | **Dates** | | **Qualifications Gained** | | | |
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| **College/University** | | | | | | **Dates** | | **Qualifications Gained** | | | |
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| **Other Training** | | | | | | **Dates** | | **Details** | | | |
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| **CURRENT EMPLOYMENT** | | | | | | | | | | | |
| **Post Title:** | |  | | | | | | **Salary:** | |  | |
| **Employer:** | |  | | | | | | | | | |
| **Start Date:** | |  | | | | **End Date:** | |  | | | |
| **Main Duties and Responsibilities:** *Max 200 words* | | | | | | | | | | | |
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| **Period of Notice Required:** | | | | |  | | | | | | |
| **Reason for leaving:** | | | | |  | | | | | | |

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| **EMPLOYMENT HISTORY** *Please complete in full and include any voluntary experience* | | | |
| **Employer** | **Job Title and Duties** | **Rate of Pay** | **Start/End Dates**  **Reason for Leaving** |
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| **LEISURE** *Please note here your leisure interests, sports, hobbies, pastimes etc.* | | | |
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| **PERSONAL STATEMENT (Max 1,000 words)** |
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| **CRIMINAL RECORD** | | | | | |
| ***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 check from Disclosure and Barring Service (DBS)/Disclosure Scotland*  1. Do you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974? Yes  / No  2. Do you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020? Yes  / No  *The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered ‘protected’. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them into account. Guidance about whether a conviction or caution should be disclosed can be found on the Ministry of Justice website.* | | | | | |
| **REFERENCES** | | | | | |
| *Please note here the names, addresses and contact details (inc. email address & Tel No) of two persons from whom we may obtain references. One of which must be your* ***current or,*** *If no current employer****, most recent*** *employer.* | | | | | |
| **1.** | | | **2.** | | |
| **DECLARATION** *Please read carefully before signing this application* | | | | | |
| 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 Disclosure and Barring Service/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:** | |  | **Dated:** |  |  |

**Please complete Equalities Monitoring on the following pages**

**RECRUITMENT MONITORING FORM**

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

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. 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? |  |

**Sex** Female  Male

**Gender** Man  Woman  Intersex  Non-binary  Prefer not to say  None

If you prefer to use your own term, please specify here:

**Are you married or in a civil partnership?** Yes  No  Prefer not to say

**Age** 16-24 25-29  30-34  35-39 40-44  45-49

50-54  55-59  60-64  65+  Prefer not to say

**What is your ethnicity?**

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box

***White***

English  Welsh  Scottish  Northern Irish  Irish

British  Gypsy or Irish Traveller  European  Prefer not to say

Any other white background, please write in:

***Asian/Asian British***

Indian  Pakistani  Bangladeshi  Chinese  Prefer not to say

Any other Asian background, please write in:

***Black/African/British/Caribbean***

African  British  Caribbean  Prefer not to say

Any other Black/African/Caribbean background, please write in:

***Mixed/multiple ethnic groups***

White and Black Caribbean  White and Black African  White and Asian  Prefer not to say Any other mixed background, please write in:

***Another ethnic group***

Arab  Prefer not to say  Any other ethnic group, please write in:

**Do you consider yourself to have a disability or heath condition?**

Yes No  Prefer not to say

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:

*The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.*

**What is your sexual orientation?**

Heterosexual  Gay woman/lesbian  Gay man  Bisexual

Prefer not to say  If you prefer to use your own term, please specify here:

**What is your religion or belief?**

No religion or belief  Buddhist  Christian  Hindu  Jewish

Muslim  Sikh  Prefer not to say  If other religion or belief, please write in:

**What is your current working pattern?**

Full-time  Part-time  Prefer not to say

**Do you have caring responsibilities? If yes, please tick all that apply:**

None  Primary carer of a child/children (under 18)

Primary carer of disabled child/children

Primary carer of disabled adult (18 and over)  Primary carer of older person

Secondary carer (another person carries out the main caring role)

Prefer not to say