

## **Main application form –**

**Post applied for** - Where did you see this post advertised?

### **Personal Details**

- Title / Names / Address / telephone numbers / email address
- National Insurance Number
- If appointed, when could you start?

### **Education (Since Age 14)**

- School/College/University
- Examinations Passed/Qualifications Gained

### **Training History/Professional Status**

- Date of Graduation/Qualification / Location Details / Notes

**Short Courses Attended** - appropriate to the role only

- Course Title / Training Provider / Date / Duration

**Employment History** - details of your current or most recent paid employer

- Employers Name and Address / Nature of Business / Job Title / Start Date (month/year) / End Date (month/year) / Period of Notice / Reason for Leaving (if applicable) / Description of Duties and Responsibilities

**Previous Paid Employment** – as above / space provided for up to 10 employers

**Employment Gaps** - please state dates with a brief explanation

**Personal Statement** - Please describe and explain how you meet each of the criteria set out in the person specification. Give examples showing how your skills, knowledge, experience, and personal strengths match requirements of the post (2 sections up to 500 words in each)

**References** - names / details of the people who have agreed to supply references

- References must include 2 most recent employers; line manager or someone in a position of responsibility for any work undertaken.
- School / College leavers should give name of lecturers / tutor / head of school and a recent employer or personal character referee.
- If you have not been in employment for a long time but have had previous employment, give name of your last known employer and a character

reference from a person of standing in the community such as doctor, solicitor or MP.

- Where it is genuinely not possible to obtain references from any of the sources outlined above, you must provide contact details of 2 personal acquaintances who would be willing to provide a reference.
- References will not be accepted from relatives or people you only know as friends.
- All referees will be contacted, so please let them know you have used their name. If you are unable to provide references, please discuss this with us.
- Please note that all reference requests will be followed up and verified by Croydon Mencap. Referees may be approached prior to interview, unless you indicate otherwise
- Details for 2 referees -
  - Type of Reference - Employer / Educational / Personal
  - Name / Address / Email address / Telephone Number
  - Job Title / Capacity in which you know referee
  - Can the referee be contacted prior to interview?

**Asylum and Immigration Act, 1996 –**

Information about this law has been sent to you with this application form.

**Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975**

**Are you currently bound over or have you ever been convicted of any offence by a Court or Court Martial in the United Kingdom or in other country? –**

If Yes, you will be asked to provide details.

**Are you currently bound by any barring decision made by the Independent Safeguarding Authority (ISA) from working with children / vulnerable adults?**

**Equality Act 2010** - protects disabled people - including those with long term health conditions, learning disabilities and "hidden" disabilities such as dyslexia. If you tell us that you have a disability, we can make reasonable adjustments to ensure that any selection processes - including interview - are fair and equitable.

**Declaration**

I certify that the information made in this application is correct and complete. I accept that providing deliberately false information will result in rejection of the application or subsequent dismissal if employed by the organisation. Name / Date

## Application for employment - list of questions on the online forms, to help you plan your application



### DBS Consent Form

I understand that in order to work/volunteer at Croydon Mencap a DBS check will be needed

Please read carefully and tick **either** Option 1 or Option 2

#### Option 1:

I already have a DBS certificate at the same level/category required for my role within Croydon Mencap **and** have subscribed to the update service.

I agree to show Croydon Mencap the certificate and allow you to do a status check with the DBS online update service.

#### Option 2:

I do not have a DBS certificate (at the correct level/category) **or** have not subscribed to the update service.

I agree to provide details for Croydon Mencap to carry out a DBS check and will show Croydon Mencap my certificate when it arrives.

Please read the statements below and then tick to show you have read and understood them

- I understand that if I start work before my DBS is completed it will be on a conditional basis and I must show Croydon Mencap the certificate as soon as I receive it. If my DBS check is unsatisfactory to Croydon Mencap I understand that my employment will have to end.
- I also understand that Croydon Mencap may share the information contained on the DBS certificate with a third party for the purposes of seeking guidance on the recruitment decision, if necessary.
- I understand that Croydon Mencap will carry out new DBS checks (at least) every 3 years.

Croydon Mencap will comply with the DBS Code of Practice at all times.

A copy of our policy on the recruitment of ex-offenders can be requested from the Croydon Mencap office.

Name / Date

## **Equality & Diversity Monitoring Form**

Confidential - Croydon Mencap strives to operate a policy of equality and diversity and not discriminate against any person. The information you provide will be treated in the strictest confidence and is for monitoring purposes only and in no way forms any part of the selection process.

- Name / Post Applied For
- Ethnic Origin
- Gender
- Age group
- Sexual orientation
- Religious Belief
- Disability Discrimination Act 2005

A person has a disability under the Disability Discrimination Act if he/she has a physical or mental impairment which has a substantial and long term adverse effect on his/her ability to carry out normal day to day activities. Long term means has lasted, or is expected to last, for 12 months.

Do you consider yourself to be a disabled person?