

## Safer Recruitment Application Form

Please ensure you complete all sections of this form and note C.V.s will not be accepted

Post applied for			Ref	ference
Personal Detai	ls			
Title :	First Name(s)	Surnan	ne	
Please supply	all of your legal firs	t names and your full le	egal last r	name.
House/ Flat Nu	ımber	Street/Road Name		
Town/City		County		
Postcode		Telephone no (home)		
Telephone no (work)		Email		
Mobile number	-			
Educations and	d Qualifications			
Name of Secon College/Univers			Date from	to
Qualifications and grades attain/ relevant informal and job related training/dates				
e of Secondary s ege/University/Oth			Date from	to
ifications and es attain/ ant informal ob related ng/dates				

## **Membership of Professional Bodies**

Please give name(s) of the body(ies) and membership status (state whether by examination) and relevant dates.

## Training Courses Attended

Please list any relevant training you have undertaken with dates (most recent first).

You will be required to provide original copies of certificates if you are invited to attend an interview where the qualification is a requirement for the job. Please ensure that all details are correct.

## **Employment History**

Please put your most recent employment first and provide full details of all paid and unpaid employment since leaving full-time education. Please explain any breaks in employment (subject to the provisions relating to disclosures under the Rehabilitation of Offenders Act 1974 and 1986).

Name of Current/Last Employer	
Address	
Postcode	Employer's telephone number
Job held	Salary
Date from	Leaving date or notice period

Brief description of responsibilities:

#### Employment history cont.

Previous Employment		
Employer's/Organisation's Name		Salary
Address		Post code
Job held	Date from	to
Employer's/Organisation's Name		Salary
Address		Post code
Job held	Date from	to
Employer's/Organisation's Name		Salary
Address		Post code
Job held	Date from	to
Employer's/Organisation's Name		Salary
Address		Post code
Job held	Date from	to
Please provide details of any gaps of employme	nt history – with da	ates

Please tell us how many days you have been absent from work due to sickness in the last 2 years

Total	Number of
days	occasions

## **Rehabilitation of Offenders Act**

Before completing this form, please read the following notes carefully.

The post you are applying for is exempt from the Rehabilitation of Offenders Act 1974. You must give details on this form of all offences, convictions, cautions or bindovers you have or any cases that you have pending subject to the condition set out below: In May 2013, legislation came into force that provides that certain old and minor cautions and convictions will no longer be subject to disclosure under the Exceptions Order 1975. The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers, and cannot be taken into account. Please take a look at the filtering rules.

<u>Https://www.gov.uk/government/publications/filtering-rules-for-criminal-record-check-certificates</u> The list of offences that will never be filtered

https://www.gov.uk/government/publications/dbs-list-of-offences-that-will-never-be-filtered-froma-criminal-record-check

Yes 🗌 No [

## Please list details of offence(s), place and date of judgements(s) and sentence(s).

All information given will be treated in the strictest confidence and will be used for this job application only.

I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may after appointment lead to disciplinary action, which could lead to my dismissal without notice.

I declare that I have ready the information above.

Signed	Date
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## Experience

#### Supporting statement and achievements

Please use this section to show how you meet the requirements of the person specification, referring to your education/qualifications, experience, knowledge, skills and competencies, paid or unpaid work. Give examples using active words like 'I wrote/planned'. Please continue on another sheet.

Supporting statement

## References

References are normally taken for successful candidates before an appointment is confirmed. For most positions these will cover the last 3 years of employment history and must be satisfactory to the council.

You must provide the names and contact details of all referees to cover your **last 3 years of employment**, or, if appropriate, your last school, college or university. It is our practise to contact the relevant HR departments to confirm that the person given as a referee has authority to write a reference. If you have any gaps in your employment, you must provide us with details what you were doing during this time.

Referees name	Job title
Address	
	Postcode
Email address	Telephone number
How do you know them?	
Referees name	Job title
Address	
	Postcode
Email address	Telephone number
How do you know them?	
If necessary please provide	any additional information on a separate sheet.

## Disability

The Disability Discrimination Act protects people with disabilities from unlawful discrimination. To meet the Act's definition, a person must have, or have had a physical or mental impairment, which had substantial long-term effects on their ability to carry out normal day to day activities. If we know that you have a disability we will make adjustments to the working arrangements and/or the working environment provided it is reasonable in the circumstances to do so.

Do you have a disability you wish us to know about at this stage?

Yes 🗌 No [

Please let us know if you have any requirements or if you believe there are any reasonable adjustments we should be making during the recruitment and selection process e.g provide a sign language interpreter.

Requirements

Relations			
Are you related to, or have a close personal relationship with, any councillor, council employee or school governor for the school you are applying?	Yes	No	
If Yes, please state their name and the relationship			
Advertisement			

Where did you see this	
job advertised?	

## Declaration

By submitting this form, you certify that all information provided is true and that you have not canvassed a councillor or employee of the council directly or indirectly in connection with this application, and will not do so.

You understand that any such activity, or failure to disclose any personal relationship with a councillor or employee of the council, will disqualify your application.

You acknowledge that if any of the information is found to be false by virtue of statement or omission after any appointment, you may face disciplinary action, which could result in your dismissal without notice.

You give consent to process the enclosed personal data under the Data Protection Act 1998 on the understanding that it is used to determine your suitability for the post applied for.

## **Prevention of Fraud**

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. This may include matching the information on this form with other information we hold about you from other sources, including data held on computer records. We may also share this information, for the same purpose, with other organisations which handle public funds.

## I acknowledge that I understand and accept these terms.

Print name

Signature

Date

# Equal Opportunities Form

Post applied for: Reference:

In line with the Codes of Practise of the Equality and Human Right Commission Redbridge Council collects and maintains information on gender, ethnic origin and disabilities of its employees. Redbridge Council will also collect and maintain information on sexual orientation, age and religion or belief of its employees. The information you have supplied will be kept confidential.

It will be appreciated If you will complete this section of the application form, which will be separated from the rest of the form before shortlist selection takes place.

You can be assured that this information will be treated in confidence and will not be available to short listing officers or interviewers or to future potential managers.

1.Gender			
Male Female	Prefer not to say		
2. Sexual Orientation:			
Heterosexual	Bisexual		
Gay man	Gay woman/lesbian		
3. Religion: Agnostic	Atheist Baha'i		
Buddhist Christian	Hindu Jain		
Jewish Muslim	Sikh No Religion		
Any other religion or belief	If other please specify:		
4. What is your ethnic group?			
Please choose one selection from A to E and the			
chosen section to indicate your cultural backgro	bund.		
A. White			
British	🗌 Irish		
Any other White Background	If other please specify:		
B. Mixed			
White and Black Caribbean	White and Black African		
White and Black Asian	Any other Mixed Background		
If other please specify:			
C. Asian or Asian British			
🗌 Indian	🗌 Pakistani		
🗌 Bangladeshi	Any other Asian Background		
If other please specify:			
D. Black or Black British			
🗌 Caribbean	African		
Any other Black background	If other please specify:		
E. Chinese or other Ethnic Group			
	Any other Background		
If other please specify:			
<b>5. Do you consider that you have a disability</b> This means long term illness, health problem of work you can do	disability that limits your daily activities or the		

6. Date of Birth