 

 

**Job Application Form**

Please complete all sections of this application form clearly either **TYPE** in your answers or **Write** in **CAPITAL LETTERS** and in **BLACK INK**.

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**Position Applied For:**
The contents of this form will be treated as confidential

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| **Section 1** | **PERSONAL DETAILS** |
| Surname: | Forenames: |
| Mr/Mrs/Ms/Miss(please identify title) |  |
| Address: |  |
|  |  |
| Postcode: | Email address: |
| Landline Number: | Mobile Number: |
| Date of Birth: |  |
| Do you have a current driving licence? | Yes No |
| National Insurance Number: |  |
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| **Section 2** | **EDUCATION HISTORY** |
| School / College / University | EducationFrom - To | Qualifications Gained |
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| **Section 3** | **CURRENT EMPLOYMENT** |
| Name & address of current employer | Current job title & salary | Start & end dates | Reasons for leaving |
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| Current duties & responsibilities: |
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| Notice period required with current employer: |  |

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| **Section 4 EMPLOYMENT HISTORY**Please list all employment, explaining any gaps between posts since you finished full time education, (beginning with your most recent employer.) Please continue on a separate sheet if necessary. |
| DateFrom - To | Name & address of employer | Job Title | Reason for leaving |
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| **Section 5 PERSON SPECIFICATION****Please clearly demonstrate below how you meet the Essential and (where appropriate) Desirable criteria as detailed in the job description.** |
| **Essential Criteria** |
| **Desirable Criteria** |
| **Why do you want to work for the Auckland Project?** |
| **What values are the most important to you?**(Values are the things that you believe are important in the way you live and work) |

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| **Section 6 HOW DID YOU LEARN OF THIS VACANCY?**For recruitment monitoring purposes. |
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| **Section 7 References**Please give the names and contact details of 2 people who we can ask to give you a reference. We may ask them before an employment offer is made. We will not ask your current employer until we get your permission or an offer has been accepted. |
| **Name -** |  |
| **Organisation -** |  |
| **Position in Organisation -** |  |
| **Contact Number -** |  |
| **Email Address -** |  |
| **Relationship to you -** |  |
|  |  |
| **Name -** |  |
| **Organisation -** |  |
| **Position in Organisation –** |  |
| **Contact Number -** |  |
| **Email Address -** |  |
| **Relationship to you -** |  |

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| **Section 8 DECLARATION**(Please read this carefully before signing the application) |
| I agree that any offer of employment is subject to satisfactory references, medical information and checks (if required) and a probationary period.* Do you need a work permit to work in the UK? **Yes** or **No**? (please circle)
* If my Application for Employment is successful, I agree to undergo a medical examination if this is required to ensure my suitability to carry out my duties and for provision of medical information as part of an occupational health scheme or private medical insurance scheme. I have given my explicit consent freely.
* If you have a disability, please tell us if there are any reasonable adjustments we can make to help you in your application or with our recruitment process.
* Have you ever been convicted of a criminal offence? **Yes ☐/No ☐**

*If yes, please specify giving dates:*NB: Due to the nature of the work for which the application is being made, the post is exempt from the provisions of the Rehabilitation of Offenders Act 1974(Exceptions) Order 1975. Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provisions of the Act and in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the organisation. Any information given will be completely confidential and will be considered only in relation to an application to which the order applies. * I confirm that the information supplied by me on this form and all documents required, with this application are complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
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| **Electronic Signature or Written Signature:** |  |

**Equality & Diversity**

The Auckland Project wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary. The information provided will be kept confidential and will be used for monitoring purposes.

If you have any questions about the form contact the HR team.

Please return the completed form to recruitment@aucklandproject.org.

**Gender**

Male □ Female □ Intersex □ Non-binary □ Prefer not to say □

If you prefer to use your own gender identity, please write in:

Is the gender you identify with the same as your gender registered at birth?

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

**Asian or Asian British**

Indian □ Pakistani □ Bangladeshi □ Chinese □ Prefer not to say □

Any other Asian background, please write in:

**Black, African, Caribbean or Black British**
African □ Caribbean □ Prefer not to say □

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

**Mixed or Multiple ethnic groups**
White & Black Caribbean □ White & Black African □ White & Asian Prefer not to say □

Any other Mixed or Multiple ethnic groups, please write in:

**White**
English □ Welsh □ Scottish □ Northern Irish □ Irish □ British □
Gypsy or Irish Traveller □ Prefer not to say □

Any other White background, please write in:

**Other ethnic group**

Arab □ Prefer not to say □

Any other ethnic group, please write in:

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

Yes □ No □ Prefer not to say □

What is the effect or Impact of your disability or health condition on your work? Please write in here:

**What is your sexual orientation?**

Heterosexual □ Gay □ Lesbian □ Bisexual □ Asexual □ Pansexual □
Undecided Prefer not to say □

If you prefer to use your own identity, please write in:

**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:

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