|  |  |  |  |
| --- | --- | --- | --- |
| **Post Applying For:**  |  | **Closing Date:**  |  |
| **Please state where you saw this post advertised:** |  |

Please complete this form writing clearly in **BLACK INK** or **type**.

|  |
| --- |
| **PART A Personal Information**  |
| **Title:**  | Mr Ms Mrs Miss Other (specify) |
| **Forename(s):**  |  |
| **Surname:** |  |
| **Date of Birth:**  |  |
| **Home Address:**  |  |
| **Home Telephone:**  |  |
| **Mobile Telephone:** |  |
| **Work Telephone:**  |  |
| **May we contact you at work?**  | **Yes / No**  |
| **Email address:**  |  |
| **Are you a car owner?**  | **Yes / No** |
| **Do you have a current driving licence?**  | **Yes / No** |
| **Do you have a clean driving licence?**  | **Yes / No** |
| **If a UK national, please provide National Insurance Number:**  |  |
| **If not a UK national, please confirm that you have a permit to work in the UK**  |  |

|  |
| --- |
| **PART B Present or Last Employment**  |
| **Present / most recent employer:**  |  |
| **Address.** |  |
| **Nature of business.** |  |
| **Position held.** |  |
| **Nature of duties. (use separate sheet if necessary)** |  |
| **Starting Date** |  |
| **End Date (If already left)**  |  |
| **Current / most recent salary:** |  |
| **Period of notice required** |  |
| **Reason for wishing to or having left** |  |

|  |
| --- |
| **PART C Work History**  |
| Give details of your previous work history (including voluntary or unpaid work) beginning with the most recent post. |

|  |  |
| --- | --- |
| **Employer:** |  |
| **Address.** |  |
| **Nature of business.** |  |
| **Dates**  | **FROM** |  | **TO**  |  |
| **Position held.** |  |
| **Nature of duties.** |  |
| **Reason for leaving.** |  |

|  |  |
| --- | --- |
| **Employer:**  |  |
| **Address.** |  |
| **Nature of business.** |  |
| **Dates.** | **FROM** |  | **TO**  |  |
| **Position held.** |  |
| **Nature of duties.** |  |
| **Reason for leaving.** |  |

|  |  |
| --- | --- |
| **Employer:** |  |
| **Address.** |  |
| **Nature of business.** |  |
| **Dates.** | **FROM** |  | **TO**  |  |
| **Position held.** |  |
| **Nature of duties.** |  |
| **Reason for leaving.** |  |

|  |  |
| --- | --- |
| **Employer:**  |  |
| **Address.** |  |
| **Nature of business.** |  |
| **Dates.** | **FROM** |  | **TO**  |  |
| **Position held.** |  |
| **Nature of duties.** |  |
| **Reason for leaving.** |  |

**Please add boxes or continue on another sheet.**

|  |
| --- |
| **PART D Other Interests** |
| **Public Duties:** | Please give details of any public duties (eg:JP, Local Councillor etc)  |

|  |
| --- |
| **PART E Education & Training**  |
| **Schools (attended from age 11) with dates.**  |  |
| **Qualifications obtained****(O/A, GCE or equivalent)** |  |

|  |  |
| --- | --- |
| **Further / Higher Education establishment attended with dates.** |  |
| **Qualifications obtained.** |  |

|  |  |
| --- | --- |
| **Professional training/qualifications,****membership, with professional body, dates and levels attained.** |  |
| **Other training / courses attended *relevant to this post*, with dates (work and outside work).**  |  |

|  |  |
| --- | --- |
| **PART F Health Section** |  |
| **Attendance:** What absences from work through sickness have you had in the last 2 years? |
| **Total days absent?** |  |
| **Number of occasions?** |  |
| **In the last 5 years have you had any period of serious illness giving rise to an absence from work for more than 2 consecutive weeks? Please provide details**  | **Yes / No**  |
| Applications from people with disabilities are welcome. If you have any medical condition or disability which will need to be considered during the recruitment process, then please inform the Chief Officer on 0161 763 9030 and we will ensure appropriate support is provided. |
| **Do you consider you have a disability If Yes and you are appointed please give details of any adjustments that would be required to take account of your disability?** | **Yes / No**  |

**PART G CRB and Rehabilitation of Offenders Act**

|  |
| --- |
| Please note that the post that you have applied for is excused from the *Rehabilitation of Offenders Act 1974,* which means disclosure **is needed**. Due to the nature of the duties, you are asked to disclose information on any convictions (whether spent or unspent), cautions, reprimands and final warnings by the Police. Only relevant convictions and other information will be taken into account so disclosure will not necessarily debar you from employment with this organisation. |
| **Have you ever been convicted by the courts, cautioned, reprimanded or given a final warning by the police?**   | **YES / NO**If you have answered yes to the above, please give details of offences, penalties and dates on a separate sheet and in an envelope marked confidential and for the attention of the Chief Officer. |
| The appointment of the successful candidate will be subject to **Criminal Records check from the Disclosure and Barring Service (DBS)**. This check is a document containing information held by the police and government departments, and it is used to make safer recruitment decisions and to ensure legal compliance with regard to the protection of vulnerable adults. A positive Disclosure of Offences will not necessarily be a bar to appointment and suitable applicants will not be refused employment because of offences that are not relevant. |

**PART H References**

|  |
| --- |
| Please give names and addresses of at least two people (other than relatives or friends) with knowledge of you and your work to whom application for a professional reference can be made.  |

|  |
| --- |
| **Present or most recent employer** |
| **Name:** |  |
| **Title/Position:**  |  |
| **Relationship:** |  |
| **Full Address (inc Postcode):**  |  |
| **Email:**  |  |
| **Telephone:** |  |
| **May we approach your present employer before the interview?** | **Yes / No** (please delete accordingly  |

|  |
| --- |
| **Second Referee** |
| **Name:** |  |
| **Title/Position:**  |  |
| **Relationship:** |  |
| **Full Address (inc Postcode):**  |  |
| **Email:**  |  |
| **Telephone:** |  |
| **May we approach your referee before the interview?** | **Yes / No** (please delete accordingly) |

**PART I Supporting Statement**

In this section, please demonstrate how your skills, experience and personal qualities meet the requirements of the **job description** and **person specification**. Please complete this section in all cases and use no more than the equivalent of **two sides** of A4 if necessary.

Continue on a separate sheet if necessary

**DECLARATION**

**Confidentiality:** In accordance with the Data Protection Act 1998, the personal details submitted with this application form will be used only for selection and interview procedures and for employment records if successful.

**Additional Information**: Please provide any additional information that is relevant to this application on an additional and attached sheet.

**Please read the following statements and sign below:**

(1) I certify that to the best of my knowledge, the information given on this form and on any attached supplementary pages is correct and complete; I have omitted nothing that, to the best of my knowledge, might affect this application; and I acknowledge that misleading statements may be sufficient for cancelling any agreements made.

(2) I understand that the declaration will include details of any criminal convictions, cautions, reprimands and final warnings. I understand too that a CRB Disclosure will be sought in the event of a successful application.

(3) I agree that Age UK Bury has the right to validate any of the information.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |

**IF YOU ARE EMAILING THIS FORM, YOU WILL BE ASKED TO SIGN YOUR FORM IF OFFERED AN INTERVIEW.**

**When completed and signed, please mark the envelope ‘Confidential’ and send or deliver to The Chief Officer, Age UK Bury, The Jubilee Centre, Mosley Avenue, Bury, BL9 6NJ.**

**Alternatively, please email your application to jobs@ageukbury.org.uk**

**PLEASE NOTE THERE IS NOT A LETTER BOX AT THE JUBILEE CENTRE. APPLICATIONS CAN BE DROPPED OFF AT RECEPTION FROM 10 AM to 4 PM, MONDAY TO FRIDAY.**

**PLEASE ALLOW FOR DELAYS IN THE POSTAGE SYSTEM.**

Application forms must be returned **no later** **than 12 midday on the closing date stated**.

Please note that your application will not be acknowledged unless you include a stamped addressed envelope.