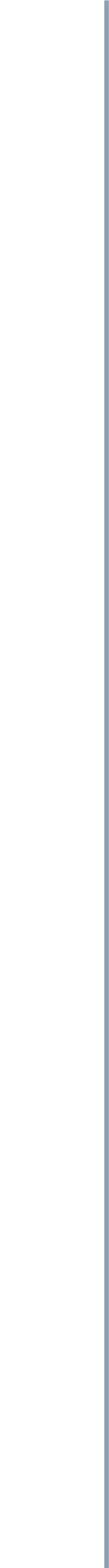


AHS Safer Recruitment Application Form



Please ensure all sections of this form are completed (CVs will not be accepted).

|  |  |  |  |
| --- | --- | --- | --- |
| Post |  | Post Reference |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Personal Details** | | | | | | |
| Title |  | First Name(s) |  | | Last Name |  |
| Please ensure to include all of your legal first names and your full legal last name | | | | | | |
| House/Flat No | |  | | Street/Road Name |  | |
| Town/City | |  | | County |  | |
| Post Code | |  | | Home Phone No |  | |
| Work Phone No | |  | | Mobile Phone No |  | |
| Email Address | |  | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Working in the UK** | | | |
| Do you require a work permit to work in the UK? |  | National Insurance Number |  |

**Education and Qualifications**

|  |  |  |  |
| --- | --- | --- | --- |
| **Secondary Education** | | | |
| Name, location and type of schools/FE colleges | Dates  **(mm/yyyy)** | | Secondary Examinations passed  **with grades** |
|  | From | To |  |
|  | From | To |  |
|  | From | To |  |
|  | From | To |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Higher/Further Education** | | | |
| University/College/Organisation/Course | Dates  **(mm/yyyy)** | | Examinations passed  **with grades** |
|  | From | To |  |
|  | From | To |  |
|  | From | To |  |
|  | From | To |  |

|  |  |
| --- | --- |
| **Training Courses Attended** | |
| Please list any relevant informal and job-related training you have undertaken with dates (most recent first) | |
| **Training Course** | **Training Dates** |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employment History** | | | | | |
| Please list 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 the disclosures under the Rehabilitation of Offenders Act 1974 and 1986). | | | | | |
| Name of current/last employer | |  | | | |
| Address |  | | | | |
| Post Code |  | | Employer’s Contact No. |  | |
| Position |  | | | Salary |  |
| Date From |  | | Leaving Date or Required Notice Period | |  |
| Brief description of responsibilities | |  | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of previous employer | |  | | | Salary |  |
| Address |  | | | | Post Code |  |
| Position |  | | Date from |  | Date to |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of previous employer | |  | | | Salary |  |
| Address |  | | | | Post Code |  |
| Position |  | | Date from |  | Date to |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of previous employer | |  | | | Salary |  |
| Address |  | | | | Post Code |  |
| Position |  | | Date from |  | Date to |  |

If necessary, please provide any additional information on a separate sheet.

|  |  |  |  |
| --- | --- | --- | --- |
| **Please provide details of any gaps in your employment history with supporting dates** | | | |
| Gap 1 |  | Dates |  |
| Gap 2 |  | Dates |  |
| Gap 3 |  | Dates |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Rehabilitation of Offenders Act** | | | |
| Before completing this part of the form, please read the following notes carefully.  All posts involving direct contact with vulnerable children are exempt from the Rehabilitation of Offenders Act 1974.  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.  **If you have ever been convicted of a criminal offence, which is not ‘protected,’ then you may ‘disclose’ these separately.** | | | |
| 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. | | | |
| Signed: |  | Dated: |  |

|  |
| --- |
| **Experience** |
| Supporting statement and achievements:  Please use this section to show how you meet the requirement of the person specification, referring to your education/qualifications, experience, knowledge, skills and competencies, paid or unpaid work.  You are invited to provide further information in support of your application. Please make sure that you refer to the job description and also include:   * The reasons why you are applying for this post * The personal qualities and experience that you feel are relevant to your suitability for this post * Key responsibilities and achievements in your present or most recent job which are relevant to this application * Details of any relevant interests or activities |
| **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 practice 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. |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Referee’s Name: |  | | | Job Title | |  |
| Address: |  | | | | | |
| Postcode: |  | | Contact No. | |  | |
| Email Address: |  | | | | | |
| How do you know them? | |  | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Referee’s Name: |  | | | Job Title | |  |
| Address: |  | | | | | |
| Postcode: |  | | Contact No. | |  | |
| Email Address: |  | | | | | |
| How do you know them? | |  | | | | |

**If necessary, please provide any additional information**

**Equal Opportunities Form**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1. Gender** | | | | | | | |
|  | Female |  | Male | | | | |
|  | | | | | | | |
| **2. Sexual Orientation** | | | | | | | |
|  | Bisexual |  | Other | | | | |
|  | Homosexual |  | Heterosexual | | | | |
|  | Declined to specify | | | | | | |
|  | | | | | | | |
| **3. Religion** | | | | | | | |
|  | Agnostic |  | Atheist |  | Baha’i |  | Buddhist |
|  | Christian |  | Hindu |  | Jain |  | Jewish |
|  | Muslim |  | No Religion |  | Sikh |  | Any Other Religion or Belief |
|  | Prefer not to say | | | | | | |
|  | | | | | | | |
| **4. Ethnic Group** | | | | | | | |
|  | African | | |  | Any Other Asian Background | | |
|  | Any Other Black Background | | |  | Any Other Mixed Background | | |
|  | Any Other White Background | | |  | Any Other Ethnic Background | | |
|  | Bangladeshi | | |  | British - White | | |
|  | Caribbean | | |  | Chinese | | |
|  | Irish | | |  | Indian | | |
|  | White and Asian | | |  | Pakistani | | |
|  | White and Black Caribbean | | |  | White and Black African | | |
|  | Declined to specify | | | | | | |
|  | | | | | | | |
| **5. Do you consider that you have a disability as defined by the Equality Act 2010?** | | | | | | | |
| The Equalities Act 2010 (EA) protects people with disabilities. The EA defines a person as disabled if they have a physical or mental impairment, which is substantial and long term (i.e. has lasted or is expected to last at least 12 months) and has an adverse effect on the person’s ability to carry out normal day-to-day  activities. | | | | | | | |
|  | No |  | Yes |  | Declined to specify | | |
|  | | | | | | | |