**Application Form**

**You must complete all sections of the Application Form in black ink or electronically. We will use this form to help us decide on your suitability for the post so please make sure it is accurate and complete. Curriculum Vitae will not be accepted.**

|  |  |
| --- | --- |
| Position applied for: | Closing date: |
| GTC/DFE Number: (Only required for Teachers) |
| Where did you first learn of this vacancy?  |

**Personal Details and Contact Details**

|  |
| --- |
| Title: Surname: Forenames (in full):  |
| Please also provide details of any former names (if applicable)  |
| Home Address: | Daytime Telephone No: |  |
| Evening Telephone No: |  |
| Mobile No: |  |
| National Insurance No: |  |
| Post Code: |  | e-mail: |  |

**Entitlement to work in the UK**

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| --- |
| All applicants will be asked at interview to provide documentary evidence of their right to work in the UK – do you have any restrictions that apply to you? **Yes\*** **no**\*If yes – please give details of any restrictions: |

**References**

Please provide details of two referees who can comment on your suitability for this post. The referee must be a line manager or supervisor. References from relatives or people who only know you as a friend are not acceptable. If you do not wish us to contact a referee prior to inteview, then please tick the appropriate box and use a separate sheet to explain why . If you have not worked previously, then please give details of a school/college/university official.

|  |  |
| --- | --- |
| **Referee 1 (current or most recent employer)** | **Referee 2** |
| Name: | Name: |
| Relationship to applicant: | Relationship to applicant: |
| Position: | Position: |
| Employer/University/College Name: | Employer/University/College Name: |
| Address: | Address: |
| Post Code: |  | Post Code: |  |
| Telephone No: |  | Telephone No: |  |
| E-mail: |  | E-mail: |  |

**Current Employment** (or last employment if not currently employed)

|  |  |
| --- | --- |
| Employer Name: |  |
| Employer Address: |  |
| Post Title: |  |
| Start date (dd/mm/yyyy): |  | End date (dd/mm/yyyy):(if applicable) |  |
| Please give a brief description of current duties, responsibilities and achievements: |  |
| Reason for leaving this post: |  |
| What is your contractual period of notice? |  | Current Salary: |  |

**Previous Employment** (please list all your employment history and continue on an additional sheet if necessary)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name and address of Employer | Job Title | Start Date(dd/mm/yyyy) | End Date(dd/mm/yyyy) | Reason forLeaving |
|  |  |  |  |  |
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**Gaps in Employment**

Please indicate and explain any gaps in employment since first leaving secondary education. Include specific dates and be sure to account for all gaps, whatever their length.

|  |  |  |
| --- | --- | --- |
| Dates from: | Dates to: | Reason for gap |
|  |  |  |
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**Education**

If the post requires a particular qualification, you will be asked to produce original evidence at your interview if shortlisted.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Secondary and Further Education (please list in chronological order)  | Level | Subjects | Grade/Result | Year Obtained |
|  |  |  |  |  |

**Other training and development (including professional, vocational or job related training)**

|  |  |
| --- | --- |
| Title and brief description of course | Date |
|  |  |
|  |  |
|  |  |

**Membership of Professional Associations or Statutory Body**

|  |  |  |
| --- | --- | --- |
| Organisation Name | Level of Membership/Role/Registration No. (if applicable) | Registration Date |
|  |  |  |
|  |  |  |
|  |  |  |
| Are you subject to any conditions or prohibitions placed on you by any statutory body in the UK. \*If Yes – please provide details in a sealed envelope and attach with this form | Yes\* |  | No |  |

**Reasons for applying for this post**

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| --- |
| This section is the most vital part of the form. We need you to give us specific information to support your application so that we can shortlist in a fair and unbiased way. We recommend that you provide as much evidence as possible to show how your skills, abilities, knowledge and experience meet the selection criteria in the post description and person specification (where provided). These documents describe the essential experience and knowledge required for the post and may include competencies required. Please provide examples which relate directly to the post you are applying for:  |

**Additional Information**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Are you licensed to drive any of the following? | Private Car |  | Motor Bike |  | PCV |  | Other (give details) |  |
| Please confirm whether this will be your only employment? | Yes |  | No\* |  |
| \* If no, provide details including days and hours worked and whether full- or part-time: |
| Have you been the subject of a formal disciplinary sanction or are you in the process of ongoing disciplinary proceedings in your current employment? | Yes \* |  | No |  |
| Have you been dismissed from any previous employment? | Yes \* |  | No |  |
| \* If yes, please indicate which employment and specify the reasons for your dismissal (use a separate sheet if necessary):***If you are short-listed for interview the panel will discuss this with you and your current or previous employers.*** |
| **Please note the following:****If you are related to anyone in this organisation please provide details (refer to notes below):** |

1. **Enhanced DBS Check:**

This post is subject to an Enhanced DBS check so that any criminal background (including “spent” convictions, bind-over orders or cautions) is disclosed to the organisation. We cannot employ someone to this post without this check. If you are successful in applying for this post we will ask the DBS for a Disclosure.

The position for which you are applying involves contact with vulnerable groups. It is exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England and Wales). For this position you are not entitled to withhold information about police cautions, bind-overs, or any criminal convictions that would otherwise have been considered “spent” under the Act.

**SHARES commits to providing 50% of the cost to process the DBS at £33.24**. **The Applicant will be responsible for the other 50% of Cost at £33.24. This will be taken from the applicants first pay process**.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Have you ever been convicted of any offence, been bound-over, or given a caution? (see notes above)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| YES\* |  | NO |  | (tick whichever is appropriate) |

\****If yes, please give details in the space provided below. The information you provide will be treated in confidence.*** |
| **Are you currently the subject of any police investigations following allegations made against you?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| YES\* |  | NO |  | (tick whichever is appropriate) |

\****If yes, please give details in the space provided below. The information you provide will be treated in confidence.*** |

**B) Safeguarding Declaration**:

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| --- |
| I declare that the information I have given on this form is complete and accurate and that: * I am not barred or disqualified from working with vulnerable groups, children or young people
* I am not subject to any sanctions or conditions on my employment imposed by the Independent Safeguarding Authority, Secretary of State or other regulatory body. .

Signed: Print Name:Date:**I Understand that there will be a charge for my DBS to be processed of £33.24 and agree to this being taken in my first wage slip. This Charge is 50% of the full cost of the online DBS at £66.48, which will be met by SHARES**Signed: Print Name:Date: |

**C) Health Declaration**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Do you currently suffer from any illness which may prevent you from carrying out your job role?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| YES\* |  | NO |  | (tick whichever is appropriate) |

\****If yes, please give details in the space provided below. The information you provide will be treated in confidence.*****Do you consider yourself to have a disability?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| YES\* |  | NO |  | (tick whichever is appropriate) |

\****If yes, please give details in the space provided below. The information you provide will be treated in confidence.*** |

|  |
| --- |
| I understand that to knowingly give false information or to leave out any relevant information could result in:* the withdrawal of any offer of appointment, or
* my dismissal at any time in the future, and possible criminal prosecution

Signed: Print Name:Date: |

**D) General Declaration**

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| **Availability:**Are there any dates when you are not available for interview? |
| **PLEASE RETURN THIS FORM TO**: recruitment@shareslancashire.co.uk |

**Data Protection**

Data Protection accordance with the Data Protection Act 1998, this organisation will only use the information given on this application form to determine your suitability for this post and to monitor equal opportunities. We will keep application forms of unsuccessful candidates for six months before being destroyed.