|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| APPLICATION FORMFOR OFFICIAL USE **Candidate No.** | | | | | | | | | dis4 | | | CROYDON COUNCILAIMING TOWARDS EQUALITY FOR ALL | |
| **ALTERNATIVE FORMATS:** This form is also available in alternative formats including large print, on disc, tape, etc. If you require this form in an alternative format please ring the Human Resources Team on the telephone number contained in the job advertisement. CONFIDENTIAL Please use black ink and write clearly or type. If completing electronically, questions are in the left hand column. You should write your answers in the right hand column. PERSONAL DETAILS | | | | | | | | | | | | | |
| Post Applied For |  | | | | | | | | | | | | |
| Job Ref No. |  | | | | | | | | | | | | |
| Location |  | | | | | | | | | | | | |
| Surname or Family Name |  | | | | | | | | | | | | |
| Former Name(s) |  | | | | | | | | | | | | |
| Other names |  | | | | | | | | | | | | |
| Home Address & Postcode |  | | | | | | | | | | | | |
| Home Telephone No. |  | | | | | | | | | | | | |
| Daytime Telephone No. |  | | | | | | | | | | | | |
| Mobile No. |  | | | | | | | | | | | | |
| E-mail Address |  | | | | | | | | | | | | |
| National Insurance No. |  | | | | | | | | | | | | |
| Are you between 16 - 65 years of age? (Delete as appropriate) | | | | | | | | | | | | | Yes / No |
| Are you applying for this post on a Job-Share basis? (Delete as appropriate) | | | | | | | | | | | | | Yes / No |
| APPLICATION DETAILS - It is essential that you comply with this section of the form: On the next page you will be asked to provide details of your most recent or current employer as well as any relevant experience/training/skills together with any other information in support of your application. Ensure that you itemise your responses so that you can demonstrate how your knowledge/skills/experience to date meet requirements on the Person Specification to be tested through the Application Form (marked ‘A’). If you omit information which we have asked for we may not be able to consider your application. Please use additional A4 sheets if necessary. | | | | | | | | | | | | | |
| How many additional sheets have been enclosed? | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | |
| PRESENT OR MOST RECENT POST | | | | | | | | | | | | | |
| Post Held | |  | | | | | | | | | | | |
| Department or Section | |  | | | | | | | | | | | |
| Main duties | |  | | | | | | | | | | | |
| Date appointed | |  | | | | | | | | | | | |
| Date left | |  | | | | | | | | | | | |
| Employer’s Name | |  | | | | | | | | | | | |
| Employer’s Address & Postcode | |  | | | | | | | | | | | |
| Employer’s Telephone No. | |  | | | | | | | | | | | |
| Reason for Leaving | |  | | | | | | | | | | | |
| Current Salary and Additions (if in Local Government) | | | | | | |  | | | | | | |
| Notice required to present Employer | | | | | | |  | | | | | | |
| Can we contact you at work? (Delete as appropriate) | | | | | | | Yes / No | | | | | | |
| DETAILS OF ALL PREVIOUS EMPLOYMENT – Most recent first. Enter details of *all* your work experience Including periods of non-employment, unpaid voluntary work and study. | | | | | | | | | | | | | |
| Name and Full Address of Employer | |  | | | | | | | | | | | |
| Date of Employment (From - To) | |  | | | | | | | | | | | |
| Position held and main duties – giving Grade and salary if known | |  | | | | | | | | | | | |
| Reason for leaving | |  | | | | | | | | | | | |
| Name and Full Address of Employer | |  | | | | | | | | | | | |
| Date of Employment (From - To) | |  | | | | | | | | | | | |
| Position held and main duties – giving Grade and salary if known | |  | | | | | | | | | | | |
| Reason for leaving | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Name and Full Address of Employer | |  | | | | | | | | | | | |
| Date of Employment (From - To) | |  | | | | | | | | | | | |
| Position held and main duties – giving Grade and salary if known | |  | | | | | | | | | | | |
| Reason for leaving | |  | | | | | | | | | | | |
| Name and Full Address of Employer | |  | | | | | | | | | | | |
| Date of Employment (From - To) | |  | | | | | | | | | | | |
| Position held and main duties – giving Grade and salary if known | |  | | | | | | | | | | | |
| Reason for leaving | |  | | | | | | | | | | | |
| Name and Full Address of Employer | |  | | | | | | | | | | | |
| Date of Employment (From - To) | |  | | | | | | | | | | | |
| Position held and main duties – giving Grade and salary if known | |  | | | | | | | | | | | |
| Reason for leaving | |  | | | | | | | | | | | |
| Name and Full Address of Employer | |  | | | | | | | | | | | |
| Date of Employment (From - To) | |  | | | | | | | | | | | |
| Position held and main duties – giving Grade and salary if known | |  | | | | | | | | | | | |
| Reason for leaving | |  | | | | | | | | | | | |
| Have you ever been dismissed by an employer? (Delete as appropriate) | | | | | | | | | | Yes / No | | | |
| If you have answered yes to this question, please give details on a separate sheet. | | | | | | | | | | | | | |
| COURSES, QUALIFICATIONS AND OTHER TRAINING UNDERTAKEN WHICH IS RELEVANT TO THIS JOB APPLICATION | | | | | | | | | | | | | |
| Course/Training | |  | | | | | | | | | | | |
| Date | |  | | | | | | | | | | | |
| Organising Body | |  | | | | | | | | | | | |
| Course/Training | |  | | | | | | | | | | | |
| Date | |  | | | | | | | | | | | |
| Organising Body | |  | | | | | | | | | | | |
| Course/Training | |  | | | | | | | | | | | |
| Date | |  | | | | | | | | | | | |
| Organising Body | |  | | | | | | | | | | | |
| Course/Training | |  | | | | | | | | | | | |
| Date | |  | | | | | | | | | | | |
| Organising Body | |  | | | | | | | | | | | |
| Course/Training | |  | | | | | | | | | | | |
| Date | |  | | | | | | | | | | | |
| Organising Body | |  | | | | | | | | | | | |
| DETAILS OF PEOPLE WHO MAY BE CONTACTED FOR REFERENCES – INCLUDING PRESENT EMPLOYER  If you have not been employed before, give details of teachers/lecturers or others who know you well enough to comment on your ability to do the job. Friends and relatives must not be used.  First referee - Preferably present or most recent employer | | | | | | | | | | | | | |
| Name | |  | | | | | | | | | | | |
| Address & Postcode | |  | | | | | | | | | | | |
| Telephone No. | |  | | | | | | | | | | | |
| Fax No. | |  | | | | | | | | | | | |
| E-mail Address | |  | | | | | | | | | | | |
| May we contact your present/most recent employer for a reference straight away? (Delete as appropriate) | | | | | | | | | | Yes / No | | | |
| If NO when may we do so? | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Other referee (preferably another employer) | | | | | | | | | | | | | |
| Name | |  | | | | | | | | | | | |
| Address & Postcode | |  | | | | | | | | | | | |
| Telephone No. | |  | | | | | | | | | | | |
| Fax No. | |  | | | | | | | | | | | |
| E-mail Address | |  | | | | | | | | | | | |
| Capacity in which known to you | |  | | | | | | | | | | | |
| Please note that we reserve the right to approach any of your previous employers for references if necessary. | | | | | | | | | | | | | |
| CONVICTIONS | | | | | | | | | | | | | |
| Do you have any criminal convictions? (Delete as appropriate) | | | | | | | | | | Yes / No | | | |
| Please give details (on a separate sheet) of any criminal convictions that you may have which are not excluded by the Rehabilitation of Offenders Act 1974 (date, conviction, sentence etc.) The disclosure of a criminal record may not necessarily prevent you from being appointed. The nature of the offence, how long ago it took place, your age at the time and any other relevant factors may be considered when a decision is made. Please note that some convictions are never considered ‘spent’ under the terms of the Act. | | | | | | | | | | | | | |
| ONLY ANSWER IF A CAR DRIVING LICENCE AND/OR USE OF A CAR IS A REQUIREMENT OF THIS POST | | | | | | | | | | | | | |
| Do you hold a current driving licence? (Delete as appropriate) | | | | | | | | | | Yes / No | | | |
| If required would you be prepared to provide a car for work use? (Delete as appropriate) | | | | | | | | | | Yes / No | | | |
| RESIDENCY | | | | | | | | | | | | | |
| Are you required to have a UK work permit? (Delete as appropriate) | | | | | | | | | | Yes / No | | | |
| PERSONAL / FAMILY RELATIONSHIP | | | | | | | | | | | | | |
| Do you have a personal/family relationship with anyone likely to be involved in the selection process for this post or with a Councillor or Senior Officer of Croydon Council? (Delete as appropriate) | | | | | | | | | | Yes / No | | | |
| If Yes, please give name(s) of relevant person(s) and the relationship(s). | |  | | | | | | | | | | | |
| I understand that seeking to unfairly influence any Councillor or employee of Croydon Council will make my application unacceptable. | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Data Protection Act 1998:  The personal information submitted by you on this application form and in any accompanying documents will be used by Croydon Council and any other person it appoints to assist, for the purpose of appointing to the job applied for and to monitor the effectiveness, efficiency and fairness of the selection process. The information may also be used in internal proceedings to consider a complaint about the selection process and/or to defend Croydon Council against a legal challenge to the fairness of the selection process from any interested party. For these reasons, the information you submit will be kept on the Council’s personnel records for 6 months if you are not short-listed and 2 years if you are. The information supplied by you will also be subject to verification and we may need to contact people and/or organisations to confirm some of the facts contained in your application, e.g. referees, previous employers, educational establishments, examination bodies, etc.    I have read the above statement and consent to the personal data submitted with this job application being used for the purposes described. This Authority is under a duty to protect the public funds it administers and may use the information you have provided on this form within the Council for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.  Please sign the statement below indicating your consent to the information being held, used and verified as described above.  If you decline to give your consent as requested above the Council will be unable to consider your application for employment.  I declare that to the best of my knowledge all parts of this form, attachments and additional sheets provided by me have been completed fully and are accurate. If I am appointed to the post I understand that any major omission or inaccurate information relevant to my application could lead to the withdrawal of an offer of employment or even dismissal. | | | | | | | | | | | | | |
| Name (please print) | |  | | | | | | | | | | | |
| SIGNATURE | |  | | | | | | | | | | | |
| Date | |  | | | | | | | | | | | |
| Please return the completed form to | |  | | | | | | | | | | | |
|  | |  | | | | | | | | | | | |
| TO BE COMPLETED ONLY BY APPLICANTS TO POSTS WHICH HAVE ACCESS TO CHILDREN AND VULNERABLE ADULTS AND BY THOSE WHO MANAGE SUCH POSTS | | | | | | | | | | | | | |
| Date of Birth | |  | | | | | | | | | | | |
| Details of educational history – most recent first. Please list all schools, colleges, universities etc, which you have attended. | | | | | | | | | | | | | |
| Educational Establishment | | |  | | | | | | | | | | |
| Course Studies | | |  | | | | | | | | | | |
| Qualifications Level (if obtained) | | |  | | | | | | | | | | |
| Date: (From / To) | | |  | | | | | | | | | | |
| Educational Establishment | | |  | | | | | | | | | | |
| Course Studies | | |  | | | | | | | | | | |
| Qualifications Level (if obtained) | | |  | | | | | | | | | | |
| Date: (From / To) | | |  | | | | | | | | | | |
| Educational Establishment | | |  | | | | | | | | | | |
| Course Studies | | |  | | | | | | | | | | |
| Qualifications Level (if obtained) | | |  | | | | | | | | | | |
| Date: (From / To) | | |  | | | | | | | | | | |
| Educational Establishment | | |  | | | | | | | | | | |
| Course Studies | | |  | | | | | | | | | | |
| Qualifications Level (if obtained) | | |  | | | | | | | | | | |
| Date: (From / To) | | |  | | | | | | | | | | |
| Please attach additional sheets if necessary. You will be asked to provide original proof of relevant Qualifications if you are interviewed. | | | | | | | | | | | | | |
| Activities involving contact with children and vulnerable adults outside the work environment (e.g. sports coach, scout leader etc). Please attach additional sheets if necessary | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| I agree, if I am selected for this appointment, to checks being made with the Criminal Records Bureau for any record of convictions or cautions against me. I am aware that such information as appropriate for Standard/Enhanced Disclosures will be made available.  I CONFIRM THAT THE INFORMATION GIVEN ABOVE IS CORRECT.  I also consent to Croydon Council carrying out other appropriate checks with the Criminal Records Bureau if it so wishes. | | | | | | | | | | | | | |
| Name (please print) | | | |  | | | | | | | | | |
| SIGNATURE | | | |  | | | | | | | | | |
| Date | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | |
| TO BE COMPLETED BY APPLICANTS WHO WILL HAVE ACCESS TO CHILDREN AND OTHER VULNERABLE PEOPLE AND BY THOSE WHO WILL MANAGE SUCH POSTS | | | | | | | | | | | | | |
| CHECK ON CONVICTIONS OR CAUTIONS | | | | | | | | | | | | | |
| A check as to the existence and content of a criminal record may be requested from the Criminal Records Bureau after a person has been selected for appointment to this post. Refusal to agree to a check being made could disqualify you from being considered for the appointment.  You are therefore asked to sign the statement below to confirm your agreement, if you are selected for the appointment, to a check being made on any criminal record applicable to you.  Under the Rehabilitation of Offenders Act 1974, you have the right not to disclose details of ‘spent’ convictions. However, for certain jobs, employers are allowed to ask about these offences. The Rehabilitation of Offenders Act 1974 (Exception) (Amendment) Order 1986 sets out details of all jobs to which this applies and the job you have applied for is included in that list. | | | | | | | | | | | | | |
| Please give details of ALL convictions, cautions, reprimands or warnings (whether spent or not). | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| CRIMINAL RECORDS BUREAU | |  | | | | | | | | | | | |
| The Criminal Records Bureau, an executive agency of the Home Office, helps employers check records which were previously held by the police, the Department of Health and the Department  for Education and Employment.  Different levels of disclosure can be provided, according to the type of work applied for. | | | | | | | | | | | | | |
| The job for which you have applied may necessitate a (Delete as appropriate) | | | | | | Standard / Enhanced disclosure | | | | | | | |
| STANDARD DISCLOSURE  These are for positions that involve regular contact with children or vulnerable adults. They contain details of all convictions, cautions, reprimands or warnings on record.  ENHANCED DISCLOSURE  These are for positions with greater contact with children or vulnerable adults, like social workers and doctors, for example. They involve an extra level of checking. | | | | | | | | | | | | | |
| PREVIOUS CHECKS | |  | | | | | | | | | | | |
| If a check has been previously carried out for you, please provide the name of the local authority who undertook it, the outcome and the date it was carried out.  It is not sufficient to give the name of an employment agency (if applicable). If you have a letter giving the result, please attach a copy. | | | | | | | | | | | | | |
| Local Authority | |  | | | | | | | | | | | |
| Date | |  | | | | | | | | | | | |
| Outcome | |  | | | | | | | | | | | |
| Have you ever been subject to any sort of investigation by an employer? (Delete as appropriate) | | | | | | | | | | | Yes / No | | |
| If you have answered “yes” to this question, please give details on a separate sheet. | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | |
| EQUAL OPPORTUNITIES MONITORING FORM | | | | | | | | | | | | | |
| Post Applied For | |  | | | | | | | | | | | |
| Ref No. | |  | | | | | | | | | | | |
| Surname or Family Name | |  | | | | | | | | | | | |
| Former Name(s) | |  | | | | | | | | | | | |
| Other names | |  | | | | | | | | | | | |
| Do you consider yourself to have a disability? (i.e. a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities) (Delete as appropriate) | | | | | | | | | | | Yes / No | | |
| If you have a disability what equipment, adaptations or adjustments to working conditions would assist you in carrying out your duties? | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | |
| What is your gender? (Delete as appropriate) | | | | | | | | | | | Female / Male | | |
| Which of the following best describes your Ethnic origin? These categories are based on the 2001 census. Your answer must be within this list: White - British / White - Irish / White - Other / Mixed - White & Black Caribbean / Mixed - White & Black African / Mixed - White & Asian / Mixed - Other Mixed Group / Asian or Asian British - Indian / Asian or Asian British - Bangladeshi / Asian or Asian British - Pakistani / Asian or Asian British - Other Asian / Black or Black British - Caribbean / Black or Black British - African / Black or Black British - Other Black background / Chinese / Any other ethnic group | | | | | | | | | | | | | |
| My Ethnic origin is? | | | | | | | |  | | | | | |
| If “other” please specify? | | | | | | | |  | | | | | |
| To which one of the following age groups do you belong? (Delete as appropriate) | | | | | | | | Under 20 / 20-29 / 30-39 / 40-49 / 50-59 / 60 and over 60 and over | | | | | |
| What is your religion? This question is optional. These categories are based on the 2001 census. (Delete as appropriate) | | | | | | | | None / Christian / Buddhist / Hindu / Muslim / Sikh / Jewish / Other | | | | | |
| If “other” please specify? | | | | | | | |  | | | | | |
| What is your Sexuality? This question is optional. (Delete as appropriate) | | | | | | | | Heterosexual / Gay Man or Lesbian / Bisexual / Prefer not to say | | | | | |
| Where did you see this post advertised? | | | | | | | |  | | | | | |
| This form will be separated from the main application form and will not be provided to the short-listing panel. Your answers will be treated in the strictest confidence and the information you provide will only be used for monitoring purposes. How you complete this form has no connection to the evaluation of your application in any way. | | | | | | | | | | | | | |
| FOR OFFICIAL USE ONLY Candidate No. | |  | | | | | | | | | | | |
| EQUAL OPPORTUNITIES STATEMENT  The Council believes that its workforce should reflect the Croydon community and that all groups within the community should have equal access to the Council’s employment opportunities.  The Council is committed to taking action to eliminate discrimination and, by redressing imbalances, to achieve genuine equality of opportunity. The Council has so far identified that women, disabled people and people from minority ethnic groups are under-represented in certain areas of the workforce. By monitoring our recruitment and the makeup of our workforce, we will ensure that our equal opportunity initiatives are having effect.  Recruitment, selection and promotion procedures are monitored to ensure that individuals are selected, promoted and treated on the basis of their relevant merits and abilities.  There is a Council procedure for dealing with complaints about the selection process. For further information, please contact the Head of Human Resources.  The Council welcomes people with disabilities. The following question is being asked to assist the Council in implementing the Disability Discrimination Act (DDA) 1995.  dis4 | | | | | | | | | | | | | |
| GUIDANCE NOTES FOR JOB APPLICANTS  Thank you for your job enquiry  The information you provide on this application form and additional sheets will determine whether you are shortlisted for interview. Please note that CV’s will not be accepted.  If you do not understand anything on the form, need help in completing it or need the form in an alternative format (large print, on disc, tape etc.) please ring the Human Resources Team on the telephone number contained in the information pack. Please let us know if someone else completes the form for you. A job description and person specification is enclosed with this pack. They should be used in conjunction with these guidance notes when you complete the application form.  PERSONAL DETAILS  Please enter your details fully and clearly so we may contact you about your application.  REFEREES  Give the names and addresses of two referees, one of whom must be your current employer (or most recent if unemployed).  If you have not been employed before, give details of teachers/lecturers or others who know you well enough to comment on your ability to do the job. Relatives and friends must not be used.  QUALIFICATIONS AND OTHER RELEVANT TRAINING  Give details of your relevant qualifications and training courses. (You will be expected to produce proof of relevant qualifications if you are interviewed).  Look at the person specification to see which qualifications/training are essential. You may also have gained qualifications and attended training which, although not essential, are relevant to the job.  We are also interested in any relevant courses which did not lead to an examination or qualification and will take into account equivalent education/qualification gained overseas or as part of a vocational training scheme.  APPLICATION DETAILS  Using separate sheets, tell us why you think you can do the job.   * You should provide evidence of your relevant experience, skills and knowledge by giving specific examples and demonstrating how you meet the criteria on the person specification. * You should think very carefully before completing this section and refer to both the job description and person specification. * You may wish to write this page out as a rough draft before submitting a handwritten or typed statement (however, do not send in a CV). * If you have little or no work experience, try to think of things you have done where you can transfer skills used at school or college, such as planning a project, or course work. * You may also have considerable domestic responsibilities such as household budgeting, or you may organise social or community activities – these are skills that can be relevant to the post. * Be positive about your personal skills and achievements – they can be just as relevant as professional experience. | | | | | | | | | | | | | |
| EXPERIENCE  We are interested in all employment you have undertaken. If you have not had a full time or permanent job, please give details of any other employment you may have had (work experience, part time, voluntary or holiday work).  IT IS IMPORTANT THAT ANY GAPS IN YOUR WORK HISTORY ARE FULLY EXPLAINED ON THE FORM.  DATA PROTECTION  The information you have supplied on this application form may be processed by computer, or may form the basis of manual records.    This data will be used to produce anonymous statistics in connection with Equal Opportunities and recruitment monitoring.  DISABILITY  The Council welcomes applications from people with disabilities.  Please let us know if you need additional assistance from us in order to complete the application form or prior to attending the selection process (special parking, ground floor venue, sign language interpreter, large print, wheelchair access, etc.)  EQUALITIES COMMITMENT Croydon Council has an equal opportunities policy which recognises the Borough is a diverse community within which each person is valued regardless of race, gender, disability, sexuality, religion or age.  RESIDENTS – CROYDON COUNCIL AIMS TO:   * provide services to all according to their needs without prejudice or bias * provide clear information about the Council’s services in different ways eg. Large print, languages other than English, tapes * work in partnership with all sections of the community * provide fair and equal employment opportunities * encourage and support people to be active in community life * celebrate the variety of lifestyles and cultures in the Borough * review and monitor services to ensure that they do not discriminate * work with others to provide an environment free from harassment and violence * act promptly on any complaints on service provision * encourage others to adopt this commitment   STAFF – CROYDON COUNCIL AIMS TO   * ensure fair and equal recruitment * ensure fair and equal treatment * develop a culture and working environment free from discrimination and harassment * act promptly on any complaints of discrimination and harassment * provide a safe, secure and accessible working environment which values and respects individuals’ identities and cultures. * listen and respond to what different groups of staff have to say * develop a culture which allows the growth of networks for different groups of staff * have a workforce that represents the make up of the Borough’s population * encourage and help all staff to reach their full potential * monitor and review all policies and procedures from an equalities perspective | | | | | | | | | | | | | |