**Application for Employment**

**Private and Confidential**

**Part 1: Primary Contact Details**

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| --- | --- |
| *Position applied for:* |  |
| *Full Name* |  |
| *Address:* |  |
| *Postcode:* |  |
| *Tel Number (Home)* |  |
| *Tel Number (Mobile)* |  |
| *Email:* |  |
| *N.I. Number* |  |

**Part 2: References**

*Please give the names and contact of two people who can be approached for their opinion about your abilities and your ability to do the job. One of these people should be either your present employer or your last employer. Neither can be a relative.*

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| --- | --- |
| ***Reference 1*** | |
| *Name* |  |
| *Job Title/employer* |  |
| *Relationship with applicant* |  |
| *Length of time known* |  |
| *Contact number and email* |  |
| *May we approach the above prior to interview?* |  |

|  |  |
| --- | --- |
| ***Reference 2*** | |
| *Name* |  |
| *Job Title/employer* |  |
| *Relationship with applicant* |  |
| *Length of time known* |  |
| *Contact number and email* |  |
| *May we approach the above prior to interview?* |  |

**Part 3: Work Experience**

***Please list your work history (paid and unpaid) starting with you most recent position (please explain any gaps)***

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| --- | --- | --- | --- | --- |
| ***Name and address of organisation*** | ***Job title and responsibilities*** | ***Dates*** | ***Salary*** | ***Reasons for leaving*** |
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**Part 4: Educations, Skills and Training**

***Formal qualifications***

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| --- | --- | --- | --- |
| ***Name of schools, college/university/training institution*** | ***Qualification*** | ***Dates*** | ***Grade awarded*** |
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***Training courses***

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| --- | --- | --- | --- |
| ***Name of Provider*** | ***Name of course*** | ***Dates*** | ***Grade awarded*** |
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***Please list below any other skills that you feel would be of benefit to the role.***

**Part 5: Personal Statement**

***Referring to the job description and specification, please explain how you meet the requirements of the position (please use additional sheets as necessary)***

**Part 6: Additional Information and Declaration**

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| --- | --- |
| ***Additional Information*** | |
| *Are there any restrictions on you taking up employment in the UK?* | ***Yes/No*** |
| *If yes, please provide details* |  |
| *Do you have a full, clean driving licence?* | ***Yes/no*** |
| *What is your current notice period?* |  |
| *Do you have a current DBS?* | ***Yes/no*** |
| *Are you a member of any professional bodies?* | ***Yes/no*** |
| *If yes, please provide details* |  |

|  |
| --- |
| ***Declaration (Please read before signing this application)*** |
| *I confirm that the information provided in this application is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.*  *I agree that should I be successful in this application, I will, if required, apply to the Disclosure & Barring Service/Disclosure Scotland for a Disclosure & Barring Certificate. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the company any offer of employment may be withdrawn or my employment terminated.* |

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| --- | --- | --- | --- |
| ***Signed*** |  | ***Date*** |  |

**Part 7: Equality and Diversity Monitoring**

*We, Sangam Association of Asian Women, are an equal opportunity employer. The aim of our policy is to ensure that no job applicant or employee receives less favourable treatment because of age, disability, gender reassignment, marriage and civil partnership, pregnancy or maternity, race, religion or belief, sex or sexual orientation. Our recruitment selection criteria and procedures (including the areas or media sources which are used in the recruitment process) are frequently reviewed to ensure that individuals are selected, promoted and treated on the basis of their relevant merits and abilities and that no applicant or employee is disadvantaged by provisions, criteria or practices which cannot be shown to be justified.*

*We would like to use your data to ensure that this policy is fully and fairly implemented. We will use your data to compile statistics on the representation amongst our workforce of the categories listed. To use this information, we need your consent. Signing in the space below will indicate that you consent to your data being used for the purposes stated. You may withdraw your consent at any time by contacting us at info@sangamcentre.org.uk*

|  |  |  |  |
| --- | --- | --- | --- |
| ***Print Name*** |  | ***Date*** |  |
| ***Signature*** |  | | |

***Gender*** *Man  Woman  Intersex  Non-binary  Prefer not to say  If you prefer to use your own term, please specify here:*

***Are you married or in a civil partnership?*** *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*

***White***

*English  Welsh  Scottish  Northern Irish  Irish *

*British  Gypsy or Irish Traveller  Prefer not to say *

*Any other white background (please state):*

***Mixed/multiple ethnic groups***

*White and Black Caribbean  White and Black African  White and Asian  Prefer not to say  Any other mixed background, (please state):*

***Asian/Asian British***

*Indian  Pakistani  Bangladeshi  Chinese  Prefer not to say *

*Any other Asian background,* *(please state):*

***Black/ African/ Caribbean/ Black British***

*African  Caribbean  Prefer not to say *

*Any other Black/African/Caribbean background (please state):*

***Other ethnic group***

*Arab  Prefer not to say  Any other ethnic group (please state):*

***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 ability to give your best at work? Please explain here:*

***What is your sexual orientation?***

Heterosexual  Gay  Lesbian  Bisexual 

Prefer not to say  If you prefer to use your own term, please specify here:

***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 state):

***What is your current working pattern?***

*Full-time  Part-time  Prefer not to say *

***Do you have caring responsibilities? If yes, please tick all that apply***

*None  Primary carer of a child/children (under 18) *

*Primary carer of disabled child/children *

*Primary carer of disabled adult (18 and over)  Primary carer of older person *

*Secondary carer (another person carries out the main caring role) *

*Prefer not to say *