# NWC_Logo_Ls_Light_Bcknd

# APPLICATION FORM

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| POST APPLIED FOR: | |
| PERSONAL DETAILS | |
| **SURNAME** | **TITLE** |
| **FIRST NAME(S)** | |
| **HOME ADDRESS** | |
| **TELEPHONE NO** | |
| **E-MAIL ADDRESS** | |
| **Do you have any disability access requirements that you would like us to take into consideration?** | |

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| CURRENT OR MOST RECENT EMPLOYMENT | | | |
| **POST TITLE** | | | **START DATE** |
| **Approx SALARY** | **REASON FOR LEAVING** | | **LEAVING DATE** |
| **EMPLOYER’S NAME & ADDRESS** | | | |
| NOTICE PERIOD | | | |
| **DESCRIBE MAIN DUTIES & RESPONSIBILITIES IN YOUR PRESENT/MOST RECENT POSITION** | | | |
| **DO YOU HAVE ANY OTHER PAID EMPLOYMENT?** | | **YES**  **NO** | |
| If yes, please give details of type of work & average hours worked | | | |

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| PREVIOUS EMPLOYMENT  (exclude current or most recent) | | |
| Please note, gaps in employment history must be explained. Please continue on ONE additional sheet if required. Please also use this space to tell us about any volunteering or unpaid work. | | |
| **EMPLOYER’S NAME & ADDRESS** | | |
| **JOB TITLE** | **START DATE** | **LEAVING DATE** |
| **BRIEF DESCRIPTION OF MAIN DUTIES AND REASON FOR LEAVING** | | |
| **EMPLOYER’S NAME & ADDRESS** | | |
| **JOB TITLE** | **START DATE** | **LEAVING DATE** |
| **BRIEF DESCRIPTION OF MAIN DUTIES AND REASON FOR LEAVING** | | |

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| EDUCATION (Secondary, Further/Higher) | | | |
| **Schools, Colleges, Universities or Institutes of Further Education Attended** | **Dates (Month/Year)** | | **Qualifications Gained, Including Subjects, Grades or Results Expected** |
| **FROM** | **TO** |
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| PROFESSIONAL QUALIFICATIONS | | | |
| **Details of any professional qualifications and/or membership of professional associations.** | | | |
| EXPERIENCE/SUITABILITY/INTERESTS | | | |
| PLEASE OUTLINE YOUR EXPERIENCE, SUITABILITY AND INTEREST IN THIS POSITION **Short listing and selection will be based on the requirements set out in the person specification.** Please address these requirements in your application, drawing on experience at work or in a voluntary capacity. Please continue on **ONE** additional sheet if required. | | | |

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| REFERENCES | |
| Please give details of two referees who would be willing to give their opinion of your character and suitability for this job, (preferably, one would be your last employer/volunteer organiser.) | |
| **NAME OF REFEREE 1** |  |
| **NAME OF ORGANISATION** |  |
| **JOB TITLE** |  |
| **ADDRESS** |  |
| **TELEPHONE** |  |
| **EMAIL** |  |
| **CAN WE CONTACT PRIOR TO INTERVIEWS? YES**  **NO** | |
| **NAME OF REFEREE 2** |  |
| **NAME OF ORGANISATION** |  |
| **JOB TITLE** |  |
| **ADDRESS** |  |
| **TELEPHONE** |  |
| **EMAIL** |  |
| **CAN WE CONTACT PRIOR TO INTERVIEWS? YES**  **NO** | |

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| ASYLUM & IMMIGRATION ACT |
| It will be a condition prior to employment that evidence regarding eligibility to work in the United Kingdom is provided. This evidence could include a birth certificate, P45, pay slip, P60, National Insurance card or an appropriately endorsed passport. |
| IMPORTANT CANDIDATE INFORMATION |
| Notes for candidates   1. Due to the nature and sensitivity of the project’s client group, it is an occupational requirement under the Equality Act 2010, Part 1, Schedule 9 for the post holder to be female. 2. If you are offered a post prior to the commencement of your employment at Nottingham Women’s Centre you may need to provide: 3. Confirmation that you are not part of a group/organisation with racist philosophy, aims, principles or policies 4. A Disclosure and Barring Service check ((Formerly Criminal Records Bureau (CRB)) 5. Proof of address 6. Employment references 7. A personal reference provided by a counter signatory 8. On line healthcare assessment 9. A professional registration check 10. Proof of qualifications. |

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| DECLARATION | |
| I certify that the information provided in this application form is correct and agree that it should form part of the basis of my engagement. I authorise Nottingham Women’s Centre to check the information I have supplied. I understand that falsification of qualification or information may lead to withdrawal of any offer of employment and/or dismissal without notice.  DATA PROTECTION ACT 1998  The recruitment panel will be given the information you have provided on this application. All information will be held securely and used only in connection with matters associated with employment at the Nottingham Women’s Centre.  All, or part of, the information provided may be disclosed or supplied to external organisations or bodies such as Courts, Bailiffs, Benefits Agency, and any other charging authority for the following purposes:   * The prevention of crime; * The apprehension or prosecution of offenders; * The assessment or collection of any tax or duty in any case where failure to disclose would be likely to prejudice any of those matters; * Data matching initiatives with other statutory bodies for the purpose of fraud prevention and detection.   I am aware that the Nottingham Women’s Centre may create and maintain computer and paper records about me; that these will be processed in accordance with the Data Protection Act 1998 and may be used for the purposes detailed above. | |
| SIGNED | DATE |
| **IF YOU HAVE COMPLETED THIS APPLICATION ELECTRONICALLY AND ARE INVITED TO INTERVIEW YOU WILL BE ASKED TO SIGN THIS FORM.** | |

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| MONITORING INFORMATION | | | |
| POST APPLIED FOR: | | | |
| **PLEASE TICK THE APPROPRIATE BOXES BELOW** | | | |
| DATA PROTECTION ACT 1998  Monitoring of ethnic origin, race or disability by Nottingham Women’s Centre helps us to see that we are reaching all parts of the community, without discrimination.  The data collected for monitoring purposes is held separately from the application forms, aggregated, and subject to strictly controlled access procedures. | | | |
| **Age** | 18-25  46-55 | 26-35  56-65 | 36-45  66+ |
| **Gender** | Female  Prefer not to say | | Transgender  Other |
| **Sexual Orientation** | Heterosexual/Straight  Bisexual | | Lesbian/Gay  Prefer not to say |
| **Do you consider yourself disabled?** | Yes  No  **(please indicate in your application form any special assistance that you may require if selected for interview)** | | |
| **Ethnic Origin** | Arab | | |
|  | Asian or Asian British | | |
|  | Black/ African/ Caribbean/ Black British | | |
|  | Gypsy or Irish Traveller Background | | |
|  | Mixed Ethnic Background | | |
|  | White British | | |
|  | White Irish | | |
|  | White Other | | |
|  | Other | | |
|  | Prefer not to say | | |
| **How did you hear about this vacancy?** | Newspaper  Internal  Internet | | Job Centre  E-bulletin  Other |
|  | **If Other please give details:** | | |