



CONFIDENTIAL  
**JOB APPLICATION**



|                        |                        |
|------------------------|------------------------|
| Post Title:            | Please return form to: |
| Post Ref No:           |                        |
| Service Area/Location: |                        |

Please complete this form clearly in black ink or type. Please do not send a CV (curriculum vitae) as an alternative to completing any section of the form. Additional sheets of paper may be attached if you run out of space.

| <b>Personal Details</b>  |  |
|--------------------------|--|
| ◆ Surname:               | ◆ National Insurance Number:   |
| ◆ Forename:              | ◆ Home Telephone:  |
| ◆ Mr/Ms/preferred title: | ◆ Work Telephone:  |
| ◆ Address:               | ◆ Mobile Telephone:  |
|                          | ◆ Email Address:<br>May we use this email address to contact you about the recruitment process?<br>Yes <input type="checkbox"/><br>No <input type="checkbox"/> |
| ◆ Post Code:             |  |

| <b>Present Appointment</b>   |
|------------------------------|
| ◆ Post held:                 |
| ◆ Employer:                  |
| ◆ Date of appointment:       |
| ◆ Present salary/wage:       |
| ◆ Period of notice required: |

**Previous employment**

(please show employment history and account for any gaps )

| <b>From</b><br>(dd/mm/yyyy) | <b>To</b><br>(dd/mm/yyyy) | <b>Position Held</b> | <b>Employer</b> | <b>Reason for Leaving</b> |
|-----------------------------|---------------------------|----------------------|-----------------|---------------------------|
|                             |                           |                      |                 |                           |

### Details of Education and Training

School, college or university and dates attended:

Course, qualification, and the results achieved (you will be required to provide evidence of your qualifications):

Please tell us about any other training you have undertaken in the last 5 years and your current membership of professional institutions:

◆ Are you a social worker registered with the Health & Care Professions Council (HCPC)?

Yes

No

If yes, please give your registration number:

### Further Personal Details

*It is the Council's policy to interview disabled candidates who meet the essential requirements of the post. For this reason it is necessary to ask:*

◆ Do you class yourself as disabled under the terms of the Equality Act 2010?

Yes

No

*The Act defines disability as a physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day-to-day activities.*

Should you require any special arrangements for interview or any other part of the selection procedure, please let us know:

◆ Do you hold a current full UK driving licence?

Yes

No

◆ Do you own a car/motor vehicle?

Yes

No

*(this will only be considered where transport is required for the post)*

### **Additional Information**

Please supply more information to help us assess your suitability for the post, including current and previous experience (this may include experience outside employment) and relevant skills and competencies. Continue on a separate sheet if you wish. Tell us why you are applying for this job and what you could bring to it:

### **Data Protection Act**

Information from this application will be processed in accordance with the Data Protection Act 1998 for the purposes registered by the Council under its notification to the Information Commissioner. Individuals have the right of access to their own personal data in accordance with the Data Protection principles.

### Important Monitoring Information

◆ Are you related to any Councillor or Senior Officer of the Authority or their partner?

Yes   
No

◆ If so please give details:

◆ Where did you see this post advertised?

### Asylum & Nationality Act 2006

◆ Are you legally eligible to work in the UK?

Yes   
No

◆ Do you have any restrictions on taking up employment in the UK?

Yes   
No

Please supply details of restrictions if you answered yes to the last question:

### Declaration of Criminal Offences form

It is essential that you complete and return the enclosed Declaration of Criminal Offences (Regulated Activity Post) form.

Please read the guidelines carefully so that you are clear about what you need to declare and the requirement for a Disclosure Barring Service (DBS) check to be undertaken.

### DBS Update Service

Have you signed up to the DBS Update Service?

Yes   
No

For more information on the DBS Update Service please visit: [www.gov.uk/dbs-update-service](http://www.gov.uk/dbs-update-service)

### Equality Monitoring

Please complete the enclosed form and return it with your application.

## References

**For all posts**

We require the names and contact details of two referees; one must be your present or most recent employer. We reserve the right to take up a reference from any previous employer.

**For any post working with children or vulnerable adults**

If you have worked with children/young people or vulnerable adults before but are not currently doing so, one referee must be the employer you were most recently employed by working with the client group concerned.

| Reference 1       | Reference 2       |
|-------------------|-------------------|
| Name:             | Name:             |
| Address:          | Address:          |
| Job Title:        | Job Title:        |
| Relationship:     | Relationship:     |
| Telephone Number: | Telephone Number: |
| Fax number:       | Fax number:       |
| Email Address:    | Email Address:    |

**I certify that 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 may automatically disqualify me from appointment or may render me liable to dismissal without notice.**

CS218

**Signature:**

**Date:**     /     /