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| **APPLICATION FOR EMPLOYMENT** | | |
| Post applied for | | |
| Full name | | |
| Address | | |
| Home telephone number | | |
| Mobile number | | |
| Email | | |
| How did you hear about this post? | | |
| If you heard about the post online please indicate which website? | | |
| Which dates (if any) are you unavailable for interview? | | |
| How much notice do you have to give your present employer? | | |
| What date are you available to commence employment? | | |
| Do you have the right to work in the UK?  (You may be asked to provide evidence) | **YES** | **NO** |
| Are you related to any staff or committee member of the Association? | **YES** | **NO** |
| If yes please give brief details | | |
| Have you applied for a post at Rockdale before? | **YES** | **NO** |
| If yes, for which post? | | |
| If yes, date of the application that you made before? | | |

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| **EDUCATION AND QUALIFICATIONS**  Please list your education from age 11 | | | |
| School/College | Examinations Passed | | |
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| Please give details of any further qualifications obtained and provide copies of relevant certificates | | | |
| Please give details of any further relevant courses attended | | | |
| Are you registered with, or have membership of, any professional body? | | **YES** | **NO** |
| Please give details and provide evidence | | | |

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| **EMPLOYMENT HISTORY**  **Start with your present or most recent job. If you are applying for a care post at Rockdale please give your full employment history listing all your previous employers** | | | | | |
| Name and address of **present** **employer** | From | To | Position held and responsibilities | Reason for leaving | Salary £ |
|  |  |  |  |  |  |
|  | | | | | |
| Name and address of **previous employers** | From | To | Position held and responsibilities | Reason for leaving | Salary £ |
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| **REFERENCES** | | | | |
| Please give the details of two work related referees, including your current or most recent post. If you cannot provide two work related references then the second reference should be from someone who has known you at least five years and is not a member of your family.  If you are applying for a care job, ideally one reference should also relate to your last period of employment of not less than three months duration involving work with vulnerable adults. Work related referees should be able to comment on your ability to meet the demands of the post for which you are applying and also confirm your reason for leaving that employment. Referees will not be contacted without your prior approval. Please indicate on the form whether the referees you have given will be expecting a request for a reference | | | | |
|  | 1st referee | | 2nd referee | |
| Name |  | |  | |
| Occupation |  | |  | |
| Address |  | |  | |
| Email address |  | |  | |
| Telephone Number |  | |  | |
| In what context do you know this referee? |  | |  | |
| Does your referee know you have given them as a reference? | **Yes** | **No** | **Yes** | **No** |
| Would your referee prefer to be contacted by post or email? |  |  |  |  |
| May we take up this reference before any offer of employment is made? | **Yes** | **No** | **Yes** | **No** |

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| **FURTHER INFORMATION** |
| Please give any other information which you think may assist your application. In particular, outline the skills, experience and abilities you have which you think are relevant to the post for which you are applying, and make you suitable for the position (please continue on another page if necessary) |

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| **CRIMINAL DISCLOSURE DECLARATION** | |
| As Rockdale Housing Association meets the requirements in respect of exempted questions under the Rehabilitation of Offenders Act 1974, applicants who are offered employment in certain posts will be subject to a criminal record check from the DBS before the appointment is confirmed. This will include details of cautions, reprimands or final warnings, as well as convictions. This check may also include reference to the DBS Adults Barred List. A criminal record will not necessarily be a bar to obtaining employment with the Association, but inclusion on the DBS Adult Barred List will. Our procedures will be carried out in the strictest confidence and in accordance with the Disclosure and Barring Service Code of Practice. The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are ‘protected’, are not subject to disclosure to employers,and cannot be taken into account.  Do you have any past or pending cautions or convictions not protected as above? | |
| **Yes** | **No** |
| If Yes please give brief details which will be kept confidential | |
| **ASSISTANCE FOR PEOPLE WITH DISABILITIES** | |
| We are an equal opportunities employer and welcome applications from all sections of the community. Under the Equality Act 2010 we are asking the following questions to ensure we can facilitate any applicants who may have a disability within the meaning of the Act. Information provided will be kept confidential. | |
| If you are registered disabled are there any special adaptations we may need to consider regarding either an interview or the work required in the post? | |
| **Yes** | **No** |
| If Yes please give details | |
| **PRIVACY STATEMENT** | |
| Rockdale Housing Association complies with the General Data Protection Regulations. We take your privacy seriously and will only use the information provided on this form as part of our recruitment and personnel procedures. We will hold job applicants’ data securely for a minimum period of 1 year before it is disposed of in a safe manner. You have the right to say you do not want us to hold your data. We will not pass on data to a third party. | |
| **DECLARATION** | |
| I agree to the personal information provided on this form being used as described above. I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect will be sufficient cause to cancel further consideration of this application, or immediate termination of employment. | |
| Signed ............................................................ Date ........................................ | |