



JOB APPLICATION FORM





2a Fielding Lane, Bromley, Kent BR2 9FL

tel: 020 8313 9725 fax: 020 8313 9703

email: enquiry@community-options.org.uk

website: www.community-options.org.uk

JOB APPLICATION FORM

Position applied for			
Job ref.		Personnel use	

PERSONAL			
Forename(s)		Surname	
Address			
Daytime telephone		Evening telephone	

PERSONAL DECLARATION: All successful candidates will be required to obtain an Enhanced Disclosure report from the Criminal Records Bureau before an offer is confirmed.

Due to the nature of the work, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974.

Have you ever been convicted of a criminal offence, or been subjected to any conditional discharges, bindovers or cautions?
If YES, please give full details:

--

As the post applied for allows substantial access to vulnerable adults, you cannot regard ANY past convictions as spent.

SIGNED	DATE
Name	

If NO, please read and sign the following declaration;
I declare that I do not possess, nor have I ever possessed a criminal conviction, nor have I been subject to any conditional discharges, bindovers or cautions.

SIGNED	DATE
Name	

Failure to disclose any relevant information or providing false or inaccurate information may be regarded as a breach of any subsequent contract of employment resulting in disciplinary action and or immediate dismissal.

EDUCATION (inc. further education and professional qualifications)

School/college/university	Address and dates of attendance	Qualifications gained and date

ADDITIONAL TRAINING AND QUALIFICATIONS (please give details and dates)

Date	Training/qualifications	Course provider

REGISTRATION TO PROFESSIONAL BODY

Professional body	Date of registration	Date of expiry of registration

Please demonstrate how you meet the requirements stated in the person specification in relation to

Experience (please continue on additional sheets if required)

Skills and qualities (please continue on additional sheets if required)

Understanding and knowledge (please continue on additional sheets if required)

Please demonstrate how you meet the requirements stated in the person specification in relation to

Personal attributes (please continue on additional sheets if required)

Please give a brief description of the responsibilities in your present employment as well any other employment

(Please continue on additional sheets if required)

What is it about the job which particularly interests you?

(Please continue on additional sheets if required)

REFEREES

At least two must be provided; one must be your present and/or last employer/care employer. Other acceptable referees would be a college supervisor or voluntary work supervisor. (Friends and relatives are not acceptable referees.) Please ensure your referees are aware that you have put their name forward.

1. Name of referee		Phone No	
Address			
Occupation			
Can we take up reference before offer of employment is made?	YES		NO
2. Name of referee		Phone No	
Address			
Occupation			
Can we take up reference before offer of employment is made?	YES		NO

HEALTH

Please give details of any period of illness which has caused you to be absent from work for more than five consecutive days during each of the past two years. (Offers of employment are subject to medical clearance)

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DECLARATION

Are you related to a current employee or committee member? If yes, please give brief details

--

Are you a tenant or resident of Community Options? If yes, please give brief details

--

All the information I have given here is true. I consent to the use of all this information when considering my application, and understand that:

- It will be treated confidentially at all times;
- If I am successful it will form part of my personnel records;
- If I am unsuccessful the information will be destroyed after six months

SIGNED	DATE
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Any information contained in this form will be treated in confidence. Failure to disclose any relevant information or providing false or inaccurate information may be regarded as a breach of any subsequent contract of employment resulting in disciplinary action and/or dismissal.

MONITORING

Post

No.

Community Options operates policies designed to ensure that all applicants are treated equally, regardless of race, religion, ethnic origin, age, sex and disability. In order to monitor whether or not such policies are effective you are asked to provide the following information. This information will not be used in assessing your suitability and failure to complete it will not affect your application but will assist us in identifying possible barriers in the process which will help us eliminate discrimination.

Age

Male

Female

How would you describe your ethnic origin? Please tick one box

1	White	British	
2		Irish	
3		Other	
4	Mixed	White and Black Caribbean	
5		White and Black African	
6		White and Asian	
7		Other	
8	Asian or Asian British	Indian	
9		Pakistani	
10		Bangladeshi	
11		Other	
12	Black or Black British	Caribbean	
13		African	
14		Other	
15	Other	Chinese	
16		Other Ethnic Background	
17		Not Stated	

Do you have a disability?

YES

NO

Have you experienced mental illness?

YES

NO

Where did you see this post advertised?

I consent to Community Options processing this information for monitoring purposes, on the understanding that it will not be divulged to any person considering my application for work with the organisation.

SIGNED

DATE

Return to: Community Options, 2a Fielding Lane, Bromley, Kent BR2 9FL



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