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| **Application Form** | Job Title: |
| **Thank you for your interest.** | Closing Date: |

The following information is necessary to ensure that full consideration can be given to all candidates.

The information given will be treated as confidential.

Please complete **all 6 pages** of the application form in black ink or type.

# 1 Personal Details

Surname: (block capitals) Title (eg. Mr, Mrs, Miss, Ms):

Firstname/s:

If you prefer to use a different firstname please state:

Address:

Post Code:

Telephone No. (home): e-mail (home):

Telephone No. (work): e-mail (work):

Telephone No. (mobile):

May we contact you at work? YES 🞏NO 🞏 Do you require a work permit? Yes 🞏 NO 🞏

Are you an existing employee? YES 🞏NO 🞏 If yes please give employee number

National Insurance Number: Date Of Birth:

1. **Employment Details** *– please give details of your current or most recent employer*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name and address of current or most recent employer | Post held and salary  *(Proof of salary may be required)* | Date appointed | Date left or notice required | Reason for leaving  *(if applicable)* |
|  |  |  |  |  |

1. **Current job** *– Write a brief description of your present (or most recent) duties/responsibilities stating to whom you report (ie. their position) and,if appropriate, who reports to you. You may wish to attach a simple diagram of your position in the organisation.*

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1. **Previous Employment** *– Please show most recent employer first and give details of any gaps in employment*

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| --- | --- | --- | --- | --- |
| Name and address of current or most recent employer | Post held and salary  *(Proof of salary may be required)* | Date appointed | Date left or notice required | Reason for leaving  *(if applicable)* |
|  |  |  |  |  |

1. **Education, Qualifications and Membership of Professional Associations** *– please give details of your education and qualifications obtained.This includes any qualifications, which you are studying now. You will be required to prove you have obtained these qualifications.*

|  |  |  |
| --- | --- | --- |
| Name of school, college, university/Professional Association | Qualification/Membership Level | Date achieved |
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1. **Training** *– Please give details of any training you have had, which is relevant to this job. Include any on-the-job training as well as formal training courses. There is no need to mention any courses listed in the Education Section.*

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| Title of training programme/course and brief description | Date started/completed |
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1. **Relevant Skills and Experience** *– Please set out on a separate sheet why you are applying for the post and*

*how you meet the requirements of the person specification e.g. the skills and abilities, experience and knowledge etc needed to do the job.* ***Wherever possible give practical examples from your current or previous employment. Examples may also include any voluntary or social activities if you consider them relevant to the requirements of the job.***

1. **References** *–* ***All Candidates*** *must give details of two referees. The first referee must be your current or most recent employer. If you are a school/college leaver please give the name and address of head teacher/tutor and also manager of most recent work experience placement – if applicable. You should not be related to your referees. The second referee should be either a previous employer or someone with knowledge of your skills and work experience.*

***Internal applicants*** *– the first referee must be your line manager.*

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| --- | --- |
| **First Reference**  *(current employer or most recent if unemployed)*  Name of referee:  Job title:  Address:    Tel No:  e-mail: | **Second Reference**  Name of referee:  Job title:  Address:    Tel No:  e-mail: |

**Please note that if you are invited to an interview both references will normally be taken up BEFORE INTERVIEW. No offer of employment will be made until references have been received.**

1. **Employment of People with Disabilities** – *The London Borough of Bromley operates an interview guarantee scheme for applicants who declare they have a ‘disability’ as defined in the Disability Discrimination Act 1995 (see page 5 of the application form for information on the definition of a disability) and meet the requirements for the job. If you consider that you have a disability relevant to the performance of the duties described in the job description for the post please provide details of:*

|  |  |
| --- | --- |
| Any assistance you will require if called for interview | Any equipment or adaptations that will assist you to meet the requirements of the job description |
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# Recruitment Monitoring

The Council is committed to Equal Opportunities. The aim of its policy is to ensure that no job applicant or employee is treated unfairly on the grounds of age, colour, national origins, nationality, race, disability, family commitments, gender, marital status, membership or otherwise of a trade union, religion, or sexual orientation.

Without accurate data on the composition of our workforce and on job applicants we are unable to monitor the effectiveness of our policies and procedures. Therefore we ask for your cooperation in completing the monitoring section of this form. This information will be used for statistical purposes only and will not be reproduced in a way that enables individuals to be identified.All information supplied by job applicants is treated in the strictest confidence.

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| --- | --- |
| **Job Title** |  |

|  |
| --- |
| Job Reference |

**Personal Detail**

Surname: *(BLOCK CAPITALS):*

Firstname/s:

**Gender**  Male 🞏 Female 🞏

**Age** - what age are you?

**Ethnic Group** *Please tick one box (or write in one box if appropriate)*

**Asian or Asian British**

🞏Bangladeshi

🞏Indian

🞏Pakistani

Asian other*(please write in)*

**Mixed**

🞏White and Asian

🞏White and Black African

🞏White and Black Caribbean

Mixed other *(please write in)*

**Chinese or other ethnic group**

🞏Chinese

Other *(please write in)*

**Black or Black British**

🞏African 🞏Caribbean

Black other*(please write in)*

**White**

🞏British 🞏European

🞏Irish 🞏Romany/traveller

White other *(please write in):*

**I decline to self classify** 🞏*(please tick)*

## Disability

To help you decide whether you have disability as defined under the Disability Discrimination Act 1995 please read the following information:

A disability is defined 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’

The effect an impairment may have on day-to-day activities is defined in the Act as falling within the following categories:

1. mobility
2. manual dexterity
3. physical co-ordination
4. continence
5. ability to lift, carry or otherwise move everyday objects
6. speech, hearing or eyesight
7. memory or ability to concentrate, learn or understand
8. perception of the risk of physical danger

The impairment has to be substantial, that is something more than trivial and it needs to be long-term, i.e. has lasted or is likely to last in total for at least twelve months or is likely to last for the rest of the life of the person affected. Having considered the above information please tick one of the following:

🞏I **do** consider myself to have a disability

🞏I **do not** consider myself to have a disability

🞏I **decline to** self classify as to whether I consider I have a disability

**Media Monitoring** *Please indicate how you became aware of the post by ticking the appropriate box.*

🞏Agency

🞏Local Newspaper *(please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)*

🞏National Newspaper *(please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)*

🞏Professional journal *(please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)*

🞏Bromley website

🞏Other web site *(please specify)* Bromley Website

🞏Internal Vacancy list

🞏Friend/relative

🞏Employment Services

🞏Other *(please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)*

Additional Information

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| Are you applying for the post on a job share basis? 🞏 Yes 🞏No  If YES, and you have a job share partner give her/his name 🞏 Yes 🞏No |
| Do you have:  a) a full current driving licence? 🞏 Yes 🞏No |
| b) a car you can use for work? 🞏 Yes 🞏No |

Are you licensed to drive any of the following (please delete those you are not licensed to drive)

Private car/Motorbike/HGV/PSV/Other (please give details)

Are you related to a Councillor or senior officer of the London Borough of Bromley? 🞏 Yes 🞏No

If yes, please state her/his name:

**Warning - Canvassing of, or failing to disclose relationship to a Councillor may disqualify you.**

**Social Work Qualification**If you are applying for a post requiring a please enter GSCC Registration No.

## Applicant’s Declaration

If you are invited to interview you may be required to answer formal questions as to whether or not you have unspent criminal convictions or summonses pending against you. Spent convictions must be disclosed for certain posts, e.g. Social Workers and Teachers as these are exempt from the provisions of the Rehabilitation of Offenders Act 1974. Some posts are subject to political restrictions. If any of the above applies to the post you are applying for, further details will be made available to you.

I declare that the information I have provided is true and accurate and in particular that I have not omitted any material facts which may have a bearing on my application. I understand that any contract of employment with the Council is offered on the basis of the information I have provided. I understand that a false declaration, which results in my appointment to the Council’s service, may render me liable to dismissal. I give explicit consent that the information which I give on this form may be processed in accordance with the Council’s registration under the Data Protection Act 1998.The information you provide to us on this form may also be used in the prevention of crime and fraud or shared with other bodies administering public funds solely for this purpose.

Signed: Date: