**Please complete this form in**



**BLACK INK & CAPITALS and return to:**

**Chief Operations Manager**

**Age UK East Grinstead & District**

**Glen Vue Centre**

**Railway Approach**

**East Grinstead**

**RH19 1BS**

**Alternatively email to operations@ageukeastgrinstead.org.uk**

**STAFF APPLICATION FORM**

Only information submitted on this form will be considered when assessing your application.

**CVs will not be accepted.**

**Post Applied for:** **Fundraising and Marketing Manager**

|  |  |
| --- | --- |
| **Surname:** |  |
| **First Name(s):** |  |
| **Address:** |  |
| **Telephone No:** |  |
| **Mobile No:** |  |
| **Email:** |  |

What is the best method to contact you? Telephone / Mobile / Email

## EDUCATION/ACADEMIC QUALIFICATIONS

Please start at the top with your most recent education/academic history.

|  |  |  |  |
| --- | --- | --- | --- |
| **School/Further Education** | **Dates Attended from/To**  **(Month & Year)** | **Qualifications Gained** | **Grade(s)**  **Achieved** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Specific Training Relevant to this Position** | **Date**  **(Month & Year)** | **Qualification**  **(if relevant)** | **Grade**  **(if relevant)** |
|  |  |  |  |

**EMPLOYMENT HISTORY**

|  |  |
| --- | --- |
| **From/To**  **(Month & Year)** |  |
| **Employer’s Name & Address** |  |
| **Position Held/ Reporting To/Brief Summary of Work** |  |
| **Reason for Leaving.** |  |
| **Final/Current Salary** |  |

**EMPLOYMENT HISTORY (continued)**

|  |  |
| --- | --- |
| **From/To**  **(Month & Year)** |  |
| **Employer’s Name & Address** |  |
| **Position Held/ Reporting To/Brief Summary of Work** |  |
| **Reason for Leaving.** |  |
| **Final/Current Salary** |  |

|  |  |
| --- | --- |
| **From/To**  **(Month & Year)** |  |
| **Employer’s Name & Address** |  |
| **Position Held/ Reporting To/Brief Summary of Work** |  |
| **Reason for Leaving.** |  |
| **Final/Current Salary** |  |

|  |  |
| --- | --- |
| **From/To**  **(Month & Year)** |  |
| **Employer’s Name & Address** |  |
| **Position Held/ Reporting To/Brief Summary of Work** |  |
| **Reason for Leaving.** |  |
| **Final/Current Salary** |  |

|  |
| --- |
| **Why do you want to work for us?**  Summarise why you would like this job and why you think you are a good candidate. Please relate your skills, knowledge and experience to the Job Description and the criteria in the Person Specification. Please use headings and extra pages if you wish. |
|  |

**Personal Contacts**

Please detail any personal contacts or relatives working within Age UK East Grinstead & District on either an employed or voluntary basis:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**References**

Please give the names and addresses of two referees, one of whom should be your current or most recent employer (if you have worked for your current employer for less than 5 years, we may also need to contact previous employers). The other referee should have known you **for at least two years** and **MUST NOT** be a family member. If your circumstances mean that you are unable to provide current references, we will be happy to discuss this further with you.

**Please give contact details for two referees who meet the above criteria:**

**Current/Most Recent Employer**

|  |  |
| --- | --- |
| Name: |  |
| Company Name: |  |
| Position in Company: |  |
| Address: |  |
| Telephone No: |  |
| Email Address: |  |
| Relationship to You? |  |
| Can we approach this referee before interview? |  |

**Additional Referee**

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Telephone No: |  |
| Email Address: |  |
| How Known to You? |  |
| Time Known to You? |  |
| Can we approach this referee before interview? |  |

**Next of Kin/Emergency Contact:**

Please give details of your Next of Kin or someone to be contacted in the event of an emergency involving yourself:

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Telephone No: |  |
| Mobile No: |  |
| Relationship to You: |  |

**Illness**

How many days have you been absent from work in the last three years due to illness?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On how many occasions have these absences occurred? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Disclosure of Criminal Convictions**

Do you have any convictions, cautions, reprimands or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)?

YES 🞎 NO 🞎

The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are “protected” and are not subject to disclosure to employers and cannot be taken into account.

Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure and Barring Service website.

If you have ticked yes, please summarise details below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous convictions will not prevent full consideration of your application to work with Age UK East Grinstead & District. Failure to disclose a criminal conviction whilst securing a post could result in the end of the staff member’s employment. A Disclosure and Barring Service (DBS) Enhanced check will be requested for all staff and volunteers undertaking specific roles.

Are you happy for the organisation to submit your name for a DBS (Disclosure and Barring Service) check:

🞎 Yes 🞎 No – please indicate why \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How We Use Your Personal Information on this Form**

The information you have provided on this form will be processed in line with the General Data Protection Regulations of April 2018. We will keep your personal details safe and will not share them with other organisations.

I understand that my personal details will be kept securely and will be entered onto the Age UK East Grinstead & District database system. I agree to Age UK East Grinstead & District processing and retaining the personal information contained on this form for any purposes connected to my application.

**DECLARATION:**

I confirm that the information given in this application is accurate and complete and that it may form the basis of a Contract of Employment with Age UK East Grinstead & District.

I understand that any false statement will be sufficient cause for rejection or, if employed, dismissal.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EQUAL OPPORTUNITIES MONITORING FORM –**

**STAFF, TRUSTEES & VOLUNTEERS**

Age UK East Grinstead & District aims to treat everyone fairly and according to their needs, to ensure that services are free from discrimination and prejudice. We also want to make sure that we can support as many people as possible with different needs and from different backgrounds and cultures. To help us do this we would be grateful if you would answer the questions below. Providing this information enables us to monitor our approach to equalities and all information given will be treated in strictest confidence and stored securely.

The form will not be used at any stage in the selection process. A disability or health problem does not preclude consideration for the job and applications from suitable people with disabilities are welcome. Please tick boxes as applicable.

**Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your Gender** Male 🞎 Female 🞎 Prefer not to say 🞎

|  |  |  |
| --- | --- | --- |
|  |  |  |

**Your Ethnic Origin:**

|  |  |  |
| --- | --- | --- |
| **White** | British | 🞎 |
| Irish | 🞎 |
| Any other White background – please specify ...................... | 🞎 |
| **Mixed** | White & Black Caribbean | 🞎 |
| White & Black African | 🞎 |
| White & Asian | 🞎 |
| Any other Mixed background – please specify ...................... | 🞎 |
| **Asian or Asian British** | Indian | 🞎 |
| Pakistani | 🞎 |
| Bangladeshi | 🞎 |
| Any other Asian or Asian British background – please specify.  ............................................... | 🞎 |
| **Black or Black British** | African | 🞎 |
| Caribbean | 🞎 |
| Any other Black or Black British background – please specify.  ............................................... | 🞎 |
| **Other** | Chinese | 🞎 |
| Romany Gypsy/Irish Traveller | 🞎 |
| Any other ethnic background – please specify ...................... | 🞎 |
| **No Response** | Prefer not to say | 🞎 |

**Your Sexual Orientation Your Religion/Belief**

|  |  |  |  |
| --- | --- | --- | --- |
| Heterosexual | 🞎 | Christian | 🞎 |
| Bisexual | 🞎 | Buddhist | 🞎 |
| Homosexual/Gay/Lesbian | 🞎 | Hindu | 🞎 |
| Transgender | 🞎 | Jewish | 🞎 |
| Other | 🞎 | Muslim | 🞎 |
| Prefer not to say | 🞎 | Sikh | 🞎 |
|  |  | Other – please specify ......................... | 🞎 |
|  |  | None | 🞎 |
|  |  | Prefer not to say | 🞎 |

**Do you consider yourself to have a disability or long-term illness?**

|  |
| --- |
| Yes 🞎 please specify.   * And do you need require any reasonable adjustments to assist you with the application and interview process.   .......................................................................................................................................................................................................................................................................................................................................................................................... |

|  |  |
| --- | --- |
| No 🞎 | Prefer not to say 🞎 |

**Thank you for taking the time to complete this form.**

**Please return to:**

Chief Operations Manager

Age UK East Grinstead & District

Glen Vue Centre

Railway Approach

East Grinstead

West Sussex

RH19 1BS

E-mail: [operations@ageukeastgrinstead.org.uk](mailto:operations@ageukeastgrinstead.org.uk)