

APPLICATION FORM

PLEASE NOTE

Complete all sections in black ink or type.

Please return completed applications	s to recruitment@ageuknortnants.org.uk				
POST APPLIED FOR:	Please indicate where you saw this post advertised:				
ΔΙΙΔ	PPLICANTS				
Please complete in capital letters:	11 210/11/10				
Surname: First Name:	Title:				
Address for correspondence:					
Address for correspondence.					
Post Code:					
Telephone (Home): Mobile:					
Telephone (Work): E-Mail:					
May we contact you at work? – we will do so discreetly	Yes No				
PRESENT AND PREVIOU	US STAFF AND VOLUNTEERS				
Are you currently employed by Age UK Northamptonshir you left Age UK Northamptonshire employment in the last					
Are you currently a volunteer with Age UK Northamptonshire or have you ceased to be a volunteer with Age UK Northamptonshire in the last 12 months?					
Please give brief details and dates worked and past experience of concern group:	erience with Age UK Northamptonshire or another Age				
	cts Office or subsequently becomes involved with insurance or ne recruitment requirements including the completion of an				



EQUAL OPPORTUNITIES RECRUITMENT MONITORING FORM

In accordance with its policy on equal opportunities in employment, the Charity will provide equal opportunities to any employee or job candidate and will not discriminate either directly or indirectly on the grounds of race, colour, ethnic origin, nationality, national origins, sex, sexual orientation, religion or belief, marital status, age or disability.

In order to assess how successful this policy is we have set up a system of monitoring all job applications. We would therefore be grateful if you would complete the questions on this form. We have asked for your name to enable us to monitor applications at short listing and appointment as well as application stage. All information will be treated in confidence and will not be seen by employee directly involved in the appointment. The questionnaire will be detached from your application form, stored separately and used only to provide statistics for monitoring purposes. Thank you for your assistance.

Post Applied for:	Location:				
Full Name:					
Gender: Female Male [Date of Birth:	Age:			
Marital Status: Married ☐ S	ingle Other				
Do you have responsibility f persons for whom you are the	· · ·	endants relate to children, elderly c	r oth	er	
Do you have any disabilitie	s? Yes No				
Ethnic origin: (Relates to a s I would describe myself as:	ense of identity/belon	ging on the basis of race/culture).			
A White:	B Mixed:				
British	White an	White and Black Caribbean			
English					
Scottish	White and	White and Black African			
Welsh	White and	Asian			
Irish Other, please specify:					
Other(please specify					
D Black	С	Asian			
Caribbean	Indian				
African	Pakistani				
Other; please specify;	Banglade	Bangladeshi			
	' <u></u>	ease specify	+-		



ASYLUM AND IMMIGRATION ACT 1996 – PROOF OF LEGAL RIGHT TO WORK IN THE UK						
Please indicate which of the following you are able to provide to prove your eligibility to work in the UK:						
Valid European Union Passport:						
European Union Birth Certificate:						
Foreign Student Matriculation Card:						
Valid and appropriate working or residential visa or permit:						
If you cannot provide any of the above, please contact the HR Department before applying for this position.						
OUTSTANDING	DISCIPLINARY/LEGAL	.PROCEEDINGS				
Are you subject to any current or outstanding di	sciplinary action or lega	I proceedings? Yes No				
If yes, please give details in a separate envelop private and for the attention of the HR Manager						
DISABIL	TY DISCRIMINATION A	ACT 1995				
Please indicate if you have any requirements to enable you to attend an interview:						
Please state your requirements below (e.g. who	oolehair accaes, eign lan	Yes No No				
Please state your requirements below (e.g. wheelchair access, sign language etc.)						
DEC	LARATION					
Information from this application may be proces	sed for purposes registe	ered by the Employer under the Data Protection fee the right of access to personal data held				
I hereby give my consent to Age UK Northam purpose of recruitment and selection.	otonshire processing the	e data supplied in this application form for the				
Any offer of employment with Age UK Nort references and, if appropriate, a satisfactory DE		ct to the receipt of at least two satisfactory				
I confirm that the information provided on this any information later discovered to be incorrect		ents is correct and complete. I understand that on of any agreements made.				
Signed:	С	Date:				

Please provide names and addresses for two references indicating in what capacity you know them. One of these must be your present or most recent employer. Please note that friends and relatives are not acceptable referees.					
1. REFEREE	2. REFEREE				
Name:	Name:				
Address:	Address:				
Telephone No. Home: Business: E Mail: In what capacity is the referee known to you?	Telephone No. Home: Business: E Mail:				
in what capacity is the referee known to you?	In what capacity is the referee known to you?				
OTHERIN	FORMATION				
Do you have a current driving licence? Do you have regular access to a vehicle? Have you any current penalty points? Yes No Yes No Yes No					
Are you to the best of your knowledge related to any member of staff or of the Board of					
Trustees of Age UK Northamptonshire? Yes No					
If yes, please give details:					
Is there any further information you would like to make us aware of in support of your application, e.g. voluntary work, membership of public bodies? Yes No					
CRIMINAL	CONVICTIONS				
Some positions require us to carry out a criminal record check through the Disclosure & Barring Service (DBS). Please give details of ANY convictions, cautions or bindovers received or proceedings being instituted against you. Please give these details on a separate sheet and insert into a sealed envelope for the attention of the Human Resources Department and mark private. Securely attach this to the application form. The Disclosure & Barring Service has produced guidance for disclosure applicants and this is available from Age UK Northamptonshire HR Department upon request, or from www.gov.uk					
If none, write "none" in the space below.					
Any failure to notify us of any such convictions, cautions or bindovers at this stage may result in any agreements between us being terminated					

	DETAILS OF LAST	2 EMPLOY	ERS INCLU	DING MOST	RECENT
Name and Address of Employer	Job Title & Responsibilities	Salary	Date From	Date To	Reason for Leaving
Current notice period:					

Name:						
Please indicate below days you would be available to work and hours per day						
(Please ✓ as applicable)						
Monday		am		pm		total hours
Tuesday		am		pm		total hours
Wednesday		am		pm		total hours
Thursday		am		pm		total hours
Friday		am		pm		total hours
Saturday		am		pm		total hours
Sunday		am		pm		total hours
Plassa usa th	ne hov helow	to tall	ue why	, voll al	ra intar	ested in this position.
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