

**POST REFERENCE NO:**

NB: PLEASE COMPLETE IN BLACK INK OR TYPESCRIPT.

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| **PERSONAL DETAILS** | | |  | | | | | | | | | | | | | | |
| **VACANCY APPLIED FOR:** | | |  | | | | | | | | | | | | | | |
| **FORENAME:** | | |  | | | | | | | **SURNAME(S):** | | | |  | | | |
| **HOME ADDRESS:** | | |  | | | | | | | | | | | | | | |
| **COUNTY:** | | |  | | | | | | | **POST CODE:** | | | |  | | | |
| **HOME/OFFICE TELEPHONE NO.:** | | |  | | | | | | | **MOBILE TELEPHONE NO.:** | | | |  | | | |
| **EMAIL ADDRESS:** | | |  | | | | | | | | | | | | | | |
| **NATIONAL INSURANCE NO.:** | | |  | | | | | | | | | | | | | | |
| **DO YOU REQUIRE A WORK PERMIT?** | | | **YES:** | | | | | | |  | | --- | | **X** | | **NO:** | | | | |  | | --- | | **X** | | |  | |
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| To comply with the Immigration, Asylum and Nationality Act 2006, you will be asked to provide original documentation or evidence of your eligibility to work in the UK. | | | | | | | | | | | | | | | | | |
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| **REFERENCES** | | |  | | | | | | |  | | | |  | | | |
| Please give the names and addresses of two referees who have known you for a minimum of six months, one of whom should be your present or most recent employer, or manager if you were in a volunteering position.  References will be taken up for all shortlisted applicants, ideally, prior to interview. | | | | | | | | | | | | | | | | | |
| **REFEREE 1 FULL NAME:** | | |  | | | | | | | | | | | | | | |
| **POSITION HELD:** | | |  | | | | | | | | | | | | | | |
| **ADDRESS:** | | |  | | | | | | | | | | | | | | |
| **COUNTY:** | | |  | | | | | | | **POST CODE:** | | | |  | | | |
| **EMAIL ADDRESS:** | | |  | | | | | | | | | | | | | | |
| Please confirm in what capacity you are known to referee 1 (delete as appropriate): | | | | | | | | | | | | | | | | | |
| Employee: | |  | | --- | | **X** | | | | As a volunteer: | | | |  | | --- | | **X** | | | | | | | Character reference: | | | |  | | --- | | **X** | | |
|  |  | | |  | | |  | | | | | |  | | |  | |
| **REFEREE 2 FULL NAME:** | | |  | | | | | | |  | | | |  | | | |
| **POSITION HELD:** | | |  | | | | | | |  | | | |  | | | |
| **ADDRESS:** | | |  | | | | | | | | | | | | | | |
| **COUNTY:** | | |  | | | | | | | **POST CODE:** | | | |  | | | |
| **EMAIL ADDRESS:** | | |  | | | | | | | | | | | | | | |
| Please confirm in what capacity you are known to referee 2 (delete as appropriate): | | | | | | | | | | | | | | | | | |
| Employee: | |  | | --- | | **X** | | | | As a volunteer: | | | |  | | --- | | **X** | | | | | | | Character reference: | | | |  | | --- | | **X** | | |
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| **CAN A.R.C CONTACT REFEREE 1?** | | **YES:** | | | | |  | | --- | | **X** | | | | | | **NO:** | | | | |  | | --- | | **X** | | | |
| **PRIOR TO:** | | **INTERVIEW?** | | | | |  | | --- | | **X** | | | | | | **OFFER?** | | | | |  | | --- | | **X** | | | |
|  | |  | | | |  | | | | |  | | | |  | | |
| **CAN A.R.C. CONTACT REFEREE 2?** | | **YES:** | | | | |  | | --- | | **X** | | | | | | **NO:** | | | | |  | | --- | | **X** | | | |
| **PRIOR TO:** | | **INTERVIEW?** | | | | |  | | --- | | **X** | | | | | | **OFFER?** | | | | |  | | --- | | **X** | | | |
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| Please note: Any offer will be subject to satisfactory references. | | | | | | | | | | | | | | | | | |
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| **EDUCATION AND TRAINING** | | | | | | | | | | | | | | | | | |
| Sight of certificates may be required before appointment. | | | | | | | | | | | | | | | | | |
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| **SCHOOL/COLLEGE/UNIVERSITY** | | | | | **QUALIFICATIONS** | | | | | | | **GRADE** | | | | | |
|  | | | | |  | | | | | | |  | | | | | |
| **PROFESSIONAL, TECHNICAL, OR MANAGEMENT QUALIFICATIONS** | | | | | | | | **COURSE DETAILS** | | | | | | | | |
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| **Membership of any Professional/Technical Associations – Please state level of membership** | | | | | | | | | | | | | | | | |
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**TRAINING AND DEVELOPMENT**

Please give details of any training and development courses or non-qualification courses that support your application. Include any on the job training as well as formal courses.

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| **TITLE OF TRAINING PROGRAMME OR COURSE** | **DURATION OF COURSE** |
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**PRESENT EMPLOYMENT**

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| --- | --- | --- | --- |
| **NAME OF CURRENT EMPLOYER:** | |  | |
| **ADDRESS OF CURRENT EMPLOYER:** | |  | |
| **CURRENT JOB TITLE:** | |  | |
| **DATE OF APPOINTMENT:** | |  | |
| **REASON FOR LEAVING:** | |  | |
| **BRIEF DETAILS OF CURRENT DUTIES:** | |  | |
|  | |  | |
| **PAST EMPLOYMENT** | |  | |
|  | |  | |
| **ORGANISATION NAME** | **JOB TITLE** | | **DATES – FROM – TO** |
|  |  | |  |
| **REASONS FOR ANY GAPS IN EMPLOYMENT (LAST 5 YEARS ONLY):** |  | | |
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| **PERSONAL STATEMENT** | | | |
| Please use this section to explain how you meet the requirements of the Job Description and Person Specification. If you are or have been involved in voluntary/unpaid activities, please also include this information in support of your application. Attach and label any additional sheets used. | | | |
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| 1. **EXPERIENCE** | | | |
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| 1. **KNOWLEDGE** | | | |
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| 1. **SKILLS** | | | |
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| 1. **PERSONAL ATTRIBUTES** | | | |
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| 1. **TRANSFERABLE SKILLS TO SUPPORT APPLICATION** | | | |
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| Continuation sheet – please note which question you are answering: | | | |
| **OTHER INFORMATION** | | | |

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| **DO YOU HOLD A CURRENT, FULL, DRIVING LICENSE?** | | **YES:** | |  | | --- | | **X** | | **NO:** | |  | | --- | | **X** | | |
| **IF REQUIRED, ARE YOU PREPARED TO USE YOUR OWN TRANSPORT FOR WORK PURPOSES?** | | **YES:** | |  | | --- | | **X** | | **NO:** | |  | | --- | | **X** | | |
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| If shortlisted for interview, you will be required – if the post requires working with children, young people, and vulnerable adults, or the post is exempt from the rehabilitation of offenders act 1974 – to complete a form providing details of any criminal convictions to obtain appropriate clearance from the Disclosure and Barring Service (DBS). | | | | | | |
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| **DECLARATION** | | | | | | |
| I declare that to the best of my knowledge the information given throughout this application form is correct and truthful. I am legally entitled to work in the UK, and I can provide evidence of this on an offer of employment being made. | | | | | | |
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| **SIGNED:** |  | | | | |
| **DATE:** | **DD/MM/YYYY** | | | | |

|  |  |
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| Please return this application form and any supplementary sheets by email to [alison.selwood@arthurrankcentre.org.uk](mailto:alison.selwood@arthurrankcentre.org.uk) by the deadline date stated.  **Please note: we do not accept Curriculum Vitae submissions in substitution for this completed application form.**  Should you be unable to return the completed application form by email, please forward the completed application form by  post, allowing plenty of time to ensure that it is received before the closing date for applications. Please mark the envelope “Private & Confidential – FAO: Alison Selwood, **[VACANCY]** APPLICATION” and send to:  Alison Selwood, Office Manager and PA to CEO  Arthur Rank Centre, Office 27 - Rural Innovation Centre, Avenue H,  Stoneleigh Park,  Kenilworth,  Warwickshire,  CV8 2LG. | |
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| **EQUALITY AND DIVERSITY MONITORING FORM** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The Arthur Rank Centre is working to become an Equal Opportunities organisation and fully supports diversity in the workplace.  We would like to monitor the effectiveness of our Equal Opportunity and Diversity Policy in the recruitment and employment of  staff. We would find it helpful to receive the following information from you to help us with this.  This monitoring and personal detail form will be separated on receipt by Office Manager and PA to CEO and will not be seen by  the shortlisting or selection panels. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **GENDER:** | **MALE:** | | |  | | --- | | **X** | | | | | **FEMALE:** | | | | |  | | --- | | **X** | | | | | **INTERSEX:** | | | | | |  | | --- | | **X** | | | | | | | | | | | |
|  | **NON-BINARY:** | | |  | | --- | | **X** | | | | | **PREFER NOT TO**  **SAY:** | | | | |  | | --- | | **X** | | | | | **YOUR**  **PREFERRED**  **TERM:** | | | | | |  | | --- | |  | | | | | | | | | | | |
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| **ARE YOU MARRIED OR IN A CIVIL PARTNERSHIP?** | **YES:** | |  | | --- | | **X** | | | | | | | **NO:** | |  | | --- | | **X** | | | | | | | | **PREFER NOT**  **TO SAY:** | | | | | | |  | | --- | | **X** | | | | | | | | |
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| The Equality Act 2010 considers an individual to have a disability if they have a physical or mental impairment that has a substantial, long term, adverse effect on their ability to carry out normal day to day activities.  **DO YOU CONSIDER YOURSELF DISABLED IN LIGHT OF THIS DEFINTION?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **YES:** | | | | | |  | | --- | | **X** | | | | | | | | | **NO:** | | |  | | --- | | **X** | | | | | | | | **PREFER NOT TO SAY:** | | | | |  | | --- | | **X** | | | |
| **(IF YES) DO YOU BELIEF THAT THIS DISABILITY WILL HAVE AN EFFECT ON YOUR ABILITY TO PERFORM THE JOB?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **YES:** | | | | | | | | | |  | | --- | | **X** | | | | | | | | **NO:** | | | | | | | | | |  | | --- | | **X** | | | | |
| **(IF YES) WHAT SUPPORT AND REASONABLE ADJUSTMENTS WILL BE REQUIRED TO ENABLE YOU TO FULFIL THESE DUTIES?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **WHITE:** | **ENGLISH:** | | | |  | | --- | | **X** | | | | | | | | | **WELSH:** | | | | | | | |  | | --- | | **X** | | | **SCOTTISH:** | | | | | | |  | | --- | | **X** | | | |
|  | **BRITISH:** | | | |  | | --- | | **X** | | | | | | | | | **IRISH TRAVELLER:** | | | | | | | |  | | --- | | **X** | | | **PREFER NOT TO SAY:** | | | | | | |  | | --- | | **X** | | | |
| **WHITE OTHER:** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **MIXED:** | **WHITE & BLACK CARIBBEAN:** | | | | | | | | | |  | | --- | | **X** | | | | | | | | | **WHITE & BLACK AFRICAN:** | | | | | | | | | |  | | --- | | **X** | | | |
|  | **WHITE & ASIAN:** | | | | | | | | | |  | | --- | | **X** | | | | | | | | | **PREFER NOT TO SAY:** | | | | | | | | | |  | | --- | | **X** | | | |
| **MIXED OTHER:** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ASIAN/ASIAN BRITISH:** | **INDIAN:** | | | | |  | | --- | | **X** | | | | | | | | | **PAKISTANI:** | | | | | |  | | --- | | **X** | | | | | | | **BANGLADESHI:** | | | | |  | | --- | | **X** | | |
|  | **CHINESE:** | | | | |  | | --- | | **X** | | | | | | | | | **PREFER NOT TO SAY:** | | | | | |  | | --- | | **X** | | | | | | |  | | | |  | |
| **ASIAN OTHER:** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **BLACK:** | **AFRICAN:** | | | | | |  | | --- | | **X** | | | | | | | | | **CARIBBEAN:** | | | |  | | --- | | **X** | | | | | | | | | **PREFER NOT TO SAY:** | | | | |  | | --- | | **X** | |
| **BLACK OTHER:** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **OTHER ETHNIC GROUP:** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **RELIGIOUS BELIEF:** | **CHRISTIAN:** | | | |  | | --- | | **X** | | | | | **JEWISH:** | | | | |  | | --- | | **X** | | | **OTHER:** | | | | | |  | | --- | | **X** | |
|  | **BUDDHIST:** | | | |  | | --- | | **X** | | | | | **MUSLIM:** | | | | |  | | --- | | **X** | | | **NONE:** | | | | | |  | | --- | | **X** | |
|  | **HINDU:** | | | |  | | --- | | **X** | | | | | **SIKH:** | | | | |  | | --- | | **X** | | | **NOT SURE:** | | | | | |  | | --- | | **X** | |
| **AGE GROUP:** | **16 – 24** | | | |  | | --- | | **X** | | | | | **25 – 29** | | | | |  | | --- | | **X** | | | **30 – 34** | | | | | |  | | --- | | **X** | |
|  | **35 – 39** | | | |  | | --- | | **X** | | | | | **40 – 44** | | | | |  | | --- | | **X** | | | **45 – 49** | | | | | |  | | --- | | **X** | |
|  | **50 – 54** | | | |  | | --- | | **X** | | | | | **55 – 59** | | | | |  | | --- | | **X** | | | **60 – 64** | | | | | |  | | --- | | **X** | |
|  | **65+** | | | |  | | --- | | **X** | | | | | **PREFER NOT TO SAY:** | | | | | | |  | | --- | | **X** | | | | | |  |
| **SEXUAL ORIENTATION:** | **HETEROSEXUAL:** | | | |  | | --- | | **X** | | | | | **BISEXUAL:** | | | | |  | | --- | | **X** | | | **HOMOSEXUAL:** | | | | | |  | | --- | | **X** | |
|  | **PREFER NOT TO SAY:** | | | |  | | --- | | **X** | | | | | **(OTHER) PREFERRED TERM:** | | | | |  | | --- | |  | |  | | | | | | | | |
| **PARENTAL LEAVE TAKEN PER CHILD:** |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | |
| **WHERE DID YOU SEE THIS POST ADVERTISED?** | **A.R.C. WEBSITE:** | |  | | --- | | **X** | | | | | **SOCIAL MEDIA:** | | | | |  | | --- | | **X** | | | | **NEWSPAPER:** | | | | | |  | | --- | | **X** | | |
|  | **OTHER:** |  | | | | | | | | | | | | | | | | | |
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| **CURRENT WORK PATTERN:** | **FULL TIME:** | | |  | | --- | | **X** | | | | | **PART TIME:** | | | | |  | | --- | | **X** | | | | | **PREFER NOT TO SAY:** | | |  | | --- | | **X** | | | |
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| **WHAT IS YOUR FLEXIBLE WORKING PATTERN?** | **NONE:** | | |  | | --- | | **X** | | | | | **FLEXI-TIME:** | | | | |  | | --- | | **X** | | | | | **STAGGERED HOURS:** | | |  | | --- | | **X** | | | |
|  | **TERM-TIME HOURS:** | | |  | | --- | | **X** | | | | | **ANNUALISED HOURS:** | | | | |  | | --- | | **X** | | | | | **JOB SHARE:** | | |  | | --- | | **X** | | | |
|  | **FLEXIBLE SHIFTS:** | | |  | | --- | | **X** | | | | | **COMPRESSED HOURS:** | | | | |  | | --- | | **X** | | | | | **HOME-WORKING:** | | |  | | --- | | **X** | | | |
|  | **PREFER NOT TO SAY:** | | |  | | --- | | **X** | | | | | **OTHER:** | | | |  | | | | | | | | |
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| **DO YOU HAVE CARING RESPONSIBILITIES?** | **NONE:** | | | | |  | | --- | | **X** | | | | | **PRIMARY CARER OF A CHILD/CHILDREN (<18):** | | | | | | | |  | | --- | | **X** | | | | |
|  | **PRIMARY CARER OF A DISABLED CHILD/CHILDREN:** | | | | |  | | --- | | **X** | | | | | **PRIMARY CARER OF A DISABLED ADULT (18+):** | | | | | | | |  | | --- | | **X** | | | | |
|  | **PRIMARY CARER OF OLDER PERSON:** | | | | |  | | --- | | **X** | | | | | **SECONDARY CARER (ANOTHER PERSON CARRIES OUT THE MAIN CARING ROLE):** | | | | | | | |  | | --- | | **X** | | | | |
|  | **PREFER NOT TO SAY:** | | | | |  | | --- | | **X** | | | | |  | | | | | | |  | | | |
| Thank you for consenting to provide the above data which will help us to improve our future application process. By providing the above information requested on this form, you are giving your consent that it may be processed and handled under the Principles of Data Protection as detailed in the Data Protection Acts 1998 & 2018, for the purposes of equality & diversity monitoring and for any legal purposes. The data will be stored securely and confidentially and for analysis purposed totally anonymised. | | | | | | | | | | | | | | | | | | | |
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| **DATA PROTECTION ACT 2018 and -Sensitive Personal Data Consent Form**  The Arthur Rank Centre will hold and use personal information provided on the application form, that could be considered as sensitive such as age, racial or ethnic origin, political opinions, religious belief, trade union membership, physical or mental health condition and sexual life. The Data Protection Act prohibits the processing of sensitive data except in specified circumstances. For example, for equal opportunities monitoring and or the retention of evidence for legal purposes in the defence of any claims of discrimination against protected characteristic as set out in the Equality Act 2010. It is only in this sensitive area that the Arthur Rank Centre wishes to monitor in order to assess the effectiveness of its equal opportunity policy and reduce the possibility of discrimination occurring and evidencing this if such a complaint is made against the Arthur Rank Centre. The application form and equality and diversity monitoring form will be confidentially destroyed for all unsuccessful candidates 12 months after the application has been made. If appointed to the vacancy, as this information has been given by consent, the new employee can request in writing, of the recruiting Manager responsible for the sensitive information contained on the monitoring form not to be transferred and filed on their personal file and destroyed when the other recruitment data is confidential destroyed after 12 months.  Please sign below that you understand the purpose of collecting this information and that will be used only for the purpose set out above and that the Arthur Rank Centre will comply with its obligations under the Data Protection Acts of 1998 and 2018 the latter introduced General Data Protection regulation in May 2018. | | | | | | | | | | | | | | | | | | | |
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| **SIGNED:** |  | | | | | | | | | | | | | | | | | | |
| **NAME:** |  | | | | | | | | | | | | | | | | | | |
| **DATE:** | **DD/MM/YYYY** | | | | | | | | | | | | | | | | | | |