Please refer to the **Application Notes** before beginning to complete the form.

If you have any access requirements for interview, have any difficulties completing the form or require any further information, please contact:

**Tel:** 01273 89 40 40

**email:** jobs@possabilitypeople.org.uk

**IN CONFIDENCE**

|  |  |
| --- | --- |
| Post applied for:  |  |
| Closing date:  |  |
| Would you consider a Job-Share? | **YES / NO** (delete as applicable) |

**Personal details**

|  |  |
| --- | --- |
| Last name |  |
| First name |  |
| Preferred name / known as |  |
| Address for Correspondence |  |
| Email Address  |  |
| Daytime Telephone Number *If this can be used* |  |
| Evening Telephone Number*If this can be used* |  |
| Have you made any previous applications to Possability People? If so, when and for which post? |  |
| Salary in present/last employment |  |
| Where did you hear about the post? |  |

**Present employment**

|  |  |  |  |
| --- | --- | --- | --- |
| EmployerName and address | Department and Post Held | Grade, Salary or Wage | Date From |
|  |  |  |  |

**Previous employment** (Most recent first, list ALL previous employment)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| EmployerName and address | Department and Post Held | Reason for Leaving | Date From | Date To |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Continue adding rows if necessary.

**Education and qualifications of relevance** (Most recent first)

|  |  |  |  |
| --- | --- | --- | --- |
| Examination or Qualificationand Method of Study | Examining Body, Educational Establishment or Membership Number | Date or Expected Date of Qualification | Level and Grade or Part |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |

Continue adding rows if necessary.

**Experience relevant to the post**

**This is the most important section of the application form** and where you can demonstrate how your skills and experience match the post requirements.

Read the **Person Specification** within the Job Descriptioncarefully and make sure you consider the items on it. Address each point on the person specification in turn.

|  |
| --- |
| *Continue on additional sheets if necessary.* |

|  |  |
| --- | --- |
| When you would be able to take up the post if selected? |  |

**Rehabilitation of Offenders Act 1974**

This post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are not entitled to withhold information when asked about convictions which for other purposes are ‘spent’ under the provisions of the Act. In the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action. Information given will be completely confidential.

|  |  |
| --- | --- |
| Have you ever been found guilty of a criminal offence? | **YES / NO** (delete as applicable) |
| If yes, please give details: |  |

**Equality Act 2010**

Possability People welcomes applications from disabled people. We guarantee an interview if you demonstrate you meet the minimum criteria and have told us you are a disabled person. Under the [Equality Act](https://www.gov.uk/definition-of-disability-under-equality-act-2010) you are disabled if you have a physical or mental impairment which is long-term and has a substantial effect on your ability to do day to day activated (long-term is 12 months or more).

Lots of people live with long term health conditions that meet the criteria set out in the equality act, without necessarily identifying themselves as disabled. You can find out more about the [definition of disability here](https://www.gov.uk/definition-of-disability-under-equality-act-2010) but it includes things like mental health conditions (such as depression, anxiety, bipolar disorder and so on) long term and/or fluctuating conditions (including the whole range of musculoskeletal conditions (MSK) epilepsy, diabetes, Cancer, MS and so on) as well as any form of impairment (sensory, mobility, cognitive, neurodiversity etc.).

|  |  |
| --- | --- |
| Do you identify as disabled?  | **YES / NO** (delete as applicable) |
| Do you have any access requirements which might require the Possability People to make reasonable adjustments in order for you to attend interview? | **YES / NO** (delete as applicable) |
| If yes, please give brief details. We may contact you to discuss these.  |  |

 **Asylum and Immigration Act**

|  |  |
| --- | --- |
| Please provide your National Insurance Number |  |

If interviewed, you will be asked to produce an official document showing your name and National Insurance number (e.g. P45, pay slip, P60, NI card, letter from a Government agency or Ministry etc.) or one of the documents listed below prior to starting your employment.

If you are not able to give your National Insurance Number, do you have evidence of your entitlement to work in the United Kingdom? - e.g.:

* a passport confirming that you are a British Citizen or a European Economic Area national, or that you are otherwise entitled to live and work in the UK;
* a birth certificate confirming birth in the UK or Republic of Ireland;
* a letter from the Home Office naming you and confirming that you are allowed to work.

|  |  |
| --- | --- |
| Do you have evidence of your entitlement to work in the United Kingdom? | **YES / NO** **/ NA** (delete as applicable) |

**Referees**

Please supply the names and addresses of **two referees**, one of whom must be your current or most recent employer, college or school.

Referees of shortlisted candidates will be contacted prior to interview unless you request otherwise. Written references will be further verified by phone.

*Form continues on next page*

**Referee 1**

|  |  |
| --- | --- |
| Name |  |
| Address for Correspondence |  |
| Email Address  |  |
| Phone number |  |
| Relationship |  |
| May we contact this referee prior to interview?  | **YES / NO** (delete as applicable) |
| Do you wish to be informed before this referee is contacted? | **YES / NO** (delete as applicable) |

**Referee 2**

|  |  |
| --- | --- |
| Name |  |
| Address for Correspondence |  |
| Email Address  |  |
| Phone number |  |
| Relationship |  |
| May we contact this referee prior to interview?  | **YES / NO** (delete as applicable) |
| Do you wish to be informed before this referee is contacted? | **YES / NO** (delete as applicable) |

**Declaration**

I declare that the information given in this application is correct to the best of my knowledge. I understand that, in the event of employment, I could be dismissed if I have deliberately given false information.

|  |  |
| --- | --- |
| Signed |  |
| Date |  |

**For shortlisting/interview panel only**

|  |  |
| --- | --- |
| Reasons for not shortlisting / interviewing: |  |
| Name |  |
| Signed |  |
| Date |  |