

Application Form (School - Non Teaching)

Please complete in black pen. Do not enclose a C.V. or additional documents as these will not be considered

All sections of the form must be completed. You may attach continuation sheets if necessary. This form is available, on request, in large print, Braille, on tape or in electronic format

Post applied	for:			Ref num	ber:				
Please ensure you read the City of York Council's policy statement on the Recruitment of Ex Offenders, included in the 'How to apply' guidance, before submitting your application:									
I confirm I hav	e reac	I the <u>Recruitm</u>	ent of Ex Offend	ers policy statemer	nt 🗌				
Persona	ıl De	tails							
Title		Surname							
Foren	ame			Forename 2					
Preferred n	ame			Previous surname					
NI nur	mber								
Address	s De	tails							
House Name	e/Num	ber							
	Sti	reet							
Area			To	own/City					
County				Postcode					
	Cou	ntry							

Contact Details – our preferremail address <u>and</u> contact telephore		ase provide an
Email address		
Telephone number		
Employment history		
 All periods of unemployment/gaps 	ent history starting with your present or make must be accounted for in the 'Gaps in Employment history, please enter N/A. er entries.	-
Current or last job title		
Employment start date	Employment end date	
School/company name and address		
If school type of School (primary/secondary etc.)		
Job details (please provide a brief description of the role)		
Reason for leaving		
Salary on		

Start date	Date of leaving	Name and address of employer	Brief description of role	Reason for leaving	Salary on leaving

Employment history (contd)

Please use continuation sheet(s) if necessary.

Please account for any gaps with dates, of three months or more, in your employment history including any travel abroad below. State the start and end date of the gap and details:

Education and Qualifications

Employment history gaps

- Enter details from the most recent to the earliest.
- Also include all professional qualifications in this section
 - Qualifications will be verified on appointment.
 - Please use continuation sheet(s) if necessary.

Place of learning and institution type	Subject	Qualification level (e.g. GCSE/A Level)	Grade	Date of attainment

Professional memberships

professionyour levelthe date or	ils of any professional memberships that are relevant to the post applied for, stating: nal body name of membership btained and expiry or renewal date bership or registration number
Membership details	
Training	
Please provide	e details of training and/or development courses you are undertaking or ed. Please include the date attended and where applicable, if you passed ourse.

Sι	upporting Information
•	Please use the following section to address each point on the skills and knowledge section of
	the Job Description. You should provide information, examples and evidence to illustrate how
	you feel you meet the criteria for the job.
•	The length of this statement should be no longer than one A4 page of text.

References

- Please enter details of two referees who can provide a reference. One of the referees must be your present employer, or if you are unemployed, your most recent employer.
- Referees should not be a relative and, ideally, should both be able to comment on your suitability for this post.
- As this position involves working with vulnerable adults or children any number of previous employers may be contacted, *without seeking further permission* from you, as part of the vetting process, in relation to your employment history. This includes vetting of internal candidates.

Reference 1 (pre-	sent or most rece	nt emplo	oyer)	
Title	Surname			
Forename			Reference Type	Employment
Email address				
Telephone				
Company Name				
Position in company				
Contact address				
Reference 2				
Title	Surname			
Forename			Reference Type (delete as applicable)	Employment/Character
Email address				
Telephone				
Company Name				
Position in company				
Contact address				

Declarations of criminal records, cautions and convictions

Posts involving work which brings you in regular contact with children, vulnerable adults, people with disabilities and learning difficulties are exempt from the provisions of the Rehabilitation of Offenders Act 1974 (ROA).

magne that you must displace information about exert or unexent convictions or coutions wh

applying for this post,		ation about spent or unspent convictions or cautions when are protected convictions and cautions as described in as) Order 1975.
		spective employees through the Disclosure & Barring vill not necessarily prevent your employment.
Are you, or have you	ever been, barred fro	n children, young people or adults? om working with, or been included on a list of people barred or vulnerable adults?
Yes No	If yes please give details	
investigated and prov	ven to be unsubstantia	oven/unproven investigations (other than those that were iated) in relation to your work with children, young people or luntary capacity or carried out privately?
Yes No	If yes please give details	
	nvictions, cautions, rep	primands or final warnings that are not protected as defined 5 (as amended in 2013)?
Yes No	If yes please give details	

Additional details	
Guaranteed interview scheme We guarantee, under the 'Positive about Disabled Peopl a disability who meet the minimum criteria for the job. Ye application form which demonstrates that you generally re each element within the skills and knowledge section of	ou must provide us with evidence in your meet the level of competence required for
Are you a disabled person applying on that basis? Yes	□ No □
Job share (Please note Job sharing is different to part	t time working)
The City of York Council welcomes individuals to apply specified within the job advert that the role is unsuitable are applying on a job share basis.	
Are you applying for this post on a job share basis? Yes	s No
Relationship with the council Are you related to any employee of City of York Council with any employee of City of York Council? Yes	
Please give details	
Applicant status	
For monitoring purposes please indicate if you are alreadyou work for Explore or Veritau you are not a CYC emplo	
Availability for interview Please indicate any dates on which it would be impossib dates you provide will be taken into consideration, please accommodate everyone's request when arranging interv	e note that it may not be possible to
Unavailable dates	
Eligibility to work in the UK	
Do you need permission to work in the UK?	Yes No
If your permission is limited, please provide full details of your immigration status, renewal dates and any other relevant information.	

How did you hear al	oout this job	?		
Internal advertising City of York Council jobs Jobs fair Universal Jobmatch/Job Word of mouth Community Care School website Other – please give detail	centre		LinkedIn Facebook Twitter National Apprentice Website NHS jobs Children's Social Work Matters School website	
Declaration				
best of my knowledge an qualifications, experience	d belief and give, dates of empl	e my pe oyment	and in any accompanying documentation and in any accompanying documentation and in any accompanying documentation to be made to content. The second in the UK, registrations are according to the content.	onfirm and for the
			d/or I may be dismissed following appo or have withheld any relevant details.	intment if I
Signed				
Print name				
Date				
Consent				
			we are obliged to ask for your conse d on your application form.	nt for us to
			ct you about your application, via the decruitment & Selection process.	tails provided
Yes No No				
On occasions we may ne process. Please indicate			eedback regarding the Recruitment & S to do this.	election
Yes No No				
You have the right to with	ndraw your cons	sent for	us to process your data at any time.	

Equal Opportunities Monitoring

The equal opportunities information provided will be treated in confidence and used only for monitoring purposes. It is not used as part of the selection process and the recruiting panel do not have access to any of this information.

Equal Opportunities Monitoring (confidential)

City of York Council is committed to equality and aims to ensure that everyone who works or applies to work for us is treated fairly and is not subjected to unlawful discrimination on grounds of their sex, age, race, ethnic or national origins, marriage or civil partnership, pregnancy and maternity, gender reassignment, sexual orientation, religion or belief, family responsibility, disability or political beliefs. Applications are welcome from all sections of the community.

Thank you for helping us to continue to improve our policies and practices.

Post applied for		Ref Number		
	nspecifie efer not t	d □ o say □		
Date of Birth:	N	lationality:		
Sexual orientation:				
☐ Heterosexual / Straight☐ Gay man☐ Not specified	Bis	bian / Gay w exual fer not to sa		
Marital status				
☐ Married ☐ Partner ☐ Civil Partner ☐ Divorced ☐ Separated ☐ Widowed	•		gle efer not to	o say
Religion				
 □ Baha'i □ Buddhist □ Christian □ Sikh □ Catholic □ Prefer not to say □ Any other religion or belief 	=	ndu [religion] Jain	☐ Jewish
Ethnic Origin Prefer to not say				
White: British Irish Other White background Mixed Race:	☐ In ☐ Pa ☐ Ba	n or Asian E dian akistani angladeshi :her Asian ba		d
 White and Black Caribbean White and Black African White and Asian Other Mixed background 	☐ Ca	k or Black B aribbean rican :her Black ba		d
Other Ethnic Groups: Any other background Chinese or other ethnic group Chinese				

Equal Opportunities Monitoring (confidential)

Disability information

The Equality Act 2010 states that someone is disabled if they have a physical or mental impairment that has a 'substantial' and 'long-term' adverse effect on their ability to do normal daily activities. Please see 'How to apply' guidance for further information.

Do you consider yourself to be disabled?
☐ Yes ☐ No Prefer to not say ☐
If you tick "Yes", please tick as many boxes below as apply:
 □ Physical impairment (such as using a wheelchair to get around and / or difficulty using arms, legs etc) □ Sensory impairment (such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment) □ Mental health condition (such as depression or bipolar) □ Learning disability (such as Down's syndrome or dyslexia or cognitive impairment such as autism or one resulting from head-injury) □ Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy) □ Other please gives details
Carer responsibilities
City of York Council values and embraces all people, regardless of any caring responsibilities that they may have, and strives to ensure that all people are treated with dignity and respect. A carer is defined as someone who looks after family, partner or friends in need of help because they are ill, frail or have a disability and that the help they provide is unpaid (except for Carers Allowance).
Are you a carer for family/friends? Yes No Prefer not to say
If yes please tick the appropriate box: Carer for: Elderly relative Friend Relative Young relative (under 18yrs)
Armed Forces Community To enable us to monitor applications from the Armed Forces community please indicate if you are part of this. Are you a member of the armed forces community?
Yes No Prefer not to say
If yes please tick the appropriate box:
☐ Reservist☐ Veteran☐ Bereaved☐ Regular personnel☐ Family of regular personnel, reservists or veterans