

For Office Use Only:

# Application for Employment



(for posts which require a CRB disclosure). Please read the "Guidance Notes for Applicants" leaflet before you fill in this application form.

Post Ref. Number:

Post Title:

Where did you see the job advertised?

## Personal details

Last Name:

Former Names (if any):

First Name/s:

Email Address:

Address:

National Insurance Number:

or Proof of Right to Work in the UK:

Postcode:

Telephone: (please tick preferred contact details)

Home:

Work:

Mobile:

Do you consider yourself to be disabled?

Yes  No

General Social Care Council (GSCC) Registration No (if applicable):

If you are already a Barnsley MBC employee, are you 'at risk'?

Yes  No

If yes, please provide details of your at risk status

Please tell us if there are any dates when you will not be available for interview:

Do you want to be considered for Job Share?

Yes  No

## Employment

Please tell us about your present employment or last job if you are currently unemployed.

Job Title:

Please describe in brief your duties and responsibilities (and key achievements where relevant)

Employer:

Employer's Address:

Post Code:

Date Employment Started: Date Employment Ended:

(if applicable)

Reason for Leaving: (if applicable)

Wage/Salary:

Notice Required: (if applicable)

We welcome applications from everyone regardless of age, race, colour, sex, marital status, religion or belief, ethnic origin, nationality, disability, gender preference or sexual orientation.

It is the Council's policy to interview disabled candidates who meet all the essential criteria. Reasonable adjustments will be made to facilitate disabilities.

Please remember to include any specific projects or areas of responsibility that you have held or are holding.

## Previous Employers

### Please tell us about all your previous employment (paid and unpaid).

Note: if you are applying for a post in residential care, the Council may approach all previous employers whether or not you have given them as referees.

Name and Address of Employer:

Main Duties/Responsibilities:

Job Title:

From:

To:

Reason for Leaving:

Name and Address of Employer:

Main Duties/Responsibilities:

Job Title:

From:

To:

Reason for Leaving:

Name and Address of Employer:

Main Duties/Responsibilities:

Job Title:

From:

To:

Reason for Leaving:

Have you had any breaks in your employment? Yes

No

If 'Yes', please give details:

Starting with the most recent, please list all previous employers in chronological order since leaving secondary school. Continue on a separate sheet if necessary.

If you do use extra pages for your previous employment, please:

1. Tick the box below and follow the same format as this application form.

2. Remember to put your name on the top of each page and number the pages.

## Information supporting your application for this post

By using clear, identifiable examples, please demonstrate how you meet the criteria indicated on the Employee Specification. Please read the "Guidance Notes for Applicants" leaflet supplied.

### Experience:

I have read and understood the guidance notes.

Blank area for providing experience details.

If you use extra  
pages for  
supporting your  
application,  
please:

1. Tick the box  
below and follow  
the same format  
as this  
application form.

2. Remember to  
put your name on  
the top of each  
page and number  
the pages.

### General and Special Knowledge:

Blank area for providing general and special knowledge details.

### Skills and Abilities:

Blank area for providing skills and abilities details.

### Additional Factors:

Blank area for providing additional factors details.

## Qualifications/Training

Please indicate from the list below the highest qualification you currently hold.

If you use extra pages for qualifications/training or membership of professional bodies, please:

1. Tick the box below and follow the same format as this application form.



2. Remember to put your name on the top of each page and number the pages.

### Entry Level definition

Entry level certificate, BTEC Certificate in life skills, BTEC Certificate in Skills for Working Life

### Qualification at level 1 and below definition

NVQ level 1, GNVQ Foundation level, GCSE/O-level grade D - G, CSE below grade 1, BTEC first or general certificate, RSA Stage I, II and III, City and Guilds part 1

### Level 2 Qualification or equivalent definition

NVQ level 2, GNVQ intermediate, RSA diploma, City and Guilds craft or part II (and other names), BTEC first or general diploma, GCSE/O-level grade A\* - C, CSE at Grade 1

### Level 3 Qualification or equivalent definition

A-levels or equivalent, AS level, NVQ level 3, GNVQ advanced, OND, ONC, BTEC National, City and Guilds advanced craft, Part III (& other names), RSA advanced diploma

### Other Higher Education below Degree Level definition

Diplomas in higher education and other higher education qualifications, HNC, HND, Higher level BTEC, Teaching qualifications for schools or further education (below degree level standard), Nursing or other medical qualifications (below degree level standard), RSA higher diploma

### Degree definition

First higher degree (BA, BSc, B.Ed) e.g. graduate member of professional institute, chartered accountant or surveyor

### Higher Degree definition

Higher Degree and postgraduate qualifications, Postgraduate diploma and certificates including PGCE, NVQ level 5, Masters, Doctorates

**Using the definitions above please state your qualification level.**

- I have no formal qualifications
- Entry Level definition
- Qualification at level 1 and below definition
- Level 2 Qualification or equivalent definition
- Level 3 Qualification or equivalent definition
- Other Higher Education below Degree Level definition
- Degree definition
- Higher Degree definition
- Other – please give details below:

Please detail that you have the required qualifications for the job as shown in the employee specification, state the awarding body and date of award. **Note:** you will be required to provide original certificates if invited for interview.

If you have no qualifications please enter N/A in the box below.

## Membership of Professional Bodies (if applicable)

Professional Body:	Registration No:	Type of Membership:	Renewal Date:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## References

**Name:**

**Job Title:**

**Address:**

**Postcode:**

**Relationship:** (e.g. Line Manager)

**Telephone Number:** (inc STD code)

**Email Address:**

Can we contact your referees before your interview?

Referee 1:  Yes  No

**Name:**

**Job Title:**

**Address:**

**Postcode:**

**Relationship:**

**Telephone Number:** (inc STD code)

**Email Address:**

Referee 2:  Yes  No

## Data Protection Act 1998

The information you have provided on this application form will be processed by computer. This data will also be used to produce statistics for equality and diversity, and recruitment monitoring.

## Canvassing will disqualify

Are you related to any Councillor or employee of the Council?  Yes  No

Please give details:

**Name:**

**Relationship:**

**Position:**

I declare that the information contained in this application is complete and correct. I understand that if I have knowingly provided false information, or directly or indirectly canvassed a Councillor or an Officer of the Council, in support of my application, I may be disqualified from consideration for the post or face disciplinary action after appointment.

**Signed:**

**Date:**

Please supply details of two referees (three in the case of posts in residential care).

One of the two referees must be your present or last employer, if previously employed.

Please note that we do not accept references from relatives or from people writing solely in the capacity of friends.

Failure to disclose information concerning previous convictions may lead to dismissal or disciplinary action by the Authority.

If necessary, please use a separate sheet of paper to give full details and place them in a sealed envelope marked 'confidential'.

If you use extra pages for details of convictions, reprimands or warnings tick the box below and follow the same format as this application form.

## Disclosure of Criminal Background of those with Access to Vulnerable Groups

Last Name:

First Name:

Former Names (if any):

Post applied for:

Post Reference Number:

You have applied for a post that is an exempt position under the provisions of the Rehabilitation of Offenders Act 1974. Therefore the statement that "after a certain period of time, convictions need not be disclosed and those convictions be treated as if they never took place" **does not apply.**

You must therefore, declare any pending prosecutions, any convictions, cautions, reprimands or warnings which you have had at any time. The information will be treated as confidential and will only apply to this particular vacancy. **It is essential that you complete and sign this form.** If you do not have any convictions, cautions, reprimands, or warnings, then please write "None" across the boxes.

If the post you have applied for also has:

"regular contact with" or

"cares for",

"trains",

"supervises" or

"is in sole charge of children or vulnerable adults",

then you will be required to apply for a Disclosure of Criminal conviction and/or record to the Criminal Records Bureau should your application be successful and before an appointment is confirmed. Having a criminal record will not necessarily bar you from employment. Each case will be judged on its own merits.

Date:

Details of convictions, cautions, reprimands or warnings:

Penalty:

















Are there any matters pending?

Yes

No

Are you barred from working with vulnerable adults? (ISA Vulnerable Adults Barred List)

Yes

No

Are you subject to sanctions from a regulatory body? (e.g. GTC)

Yes

No

Are you barred from working with children (ISA Children's Barred List?)

Yes

No

If you answered "Yes" to any of the above, please give details below:

## Declaration

I declare that the particulars given are correct and that I have not withheld any facts which might unfavourably affect my application. I am aware that to withhold or falsify information could result in my application being rejected, dismissal or disciplinary action, or possible referral to the police.

Signed:

Date:

As a minimum, would you fill in your name, date of birth and the post applied for; the remainder of this section is optional.

Any data provided on this form will be held securely under the terms of the Data Protection Act.

There is a definition of disability in the "Guidance Notes for Applicants" leaflet

For Office Use Only:

## Equality Monitoring

We are committed to Equality of Opportunity in Employment. By collecting this information, we are able to ensure that our policies and systems are objective and fair. Please help us by completing this form. The shortlisting/ interviewing panel will not see this information.

Post Ref. Number:

Post Title:

Name:

Date of Birth:

Are you currently employed by Barnsley MBC?

Yes

No

For ethnicity, choose ONE section from A to E, then tick the appropriate box to indicate your cultural background. If you tick an "Other" box, please specify as shown.

### Ethnicity

Prefer not to say

#### A White

British

Irish

European

Gypsy/Traveller

Irish

Other White\* - Please state:

#### B Mixed

White and Black Caribbean

White and Black African

White and Asian

Other Mixed\* - Please state:

#### C Asian or Asian British

Indian

Pakistani

Bangladeshi

Other Asian\* - Please state:

#### D Black or Black British

Caribbean

African

Other Black\* - Please state:

#### E Chinese, Chinese British, or Other Ethnic Group

Chinese

Other Chinese\* - Please state:

\*If 'Other' please specify

### Religion

Prefer not to say

Christian (including all Christian denominations)

Buddhist

Hindu

Rastafarian

Muslim

Sikh

Jewish

None

Other\*

Prefer not to say

\*If 'Other' please specify

### Gender

Male

Female

### Disabled

Do you consider yourself to be disabled?

Prefer not to say

Yes

No

### Age Group

0 - 16

16 - 20

21 - 30

31 - 40

41 - 50

51 - 60

61 - 70

71 - 80

80+

### Sexual Orientation

Bisexual

Gay man

Heterosexual/straight

Lesbian

Prefer not to say

Are you open about your sexual orientation at work?

Yes

No

**Thank you for your help**

**For Office Use Only** (tick as appropriate)

Candidate Shortlisted:

Yes

No

Candidate Appointed:

Yes

No

