

**APPLICATION FORM**

**CONFIDENTIAL**

Please ensure that you complete and return all sections of this form and note C.V.s will not be accepted.

<b>Post applied for</b>		<b>Ref No.</b> <small>(if available)</small>	
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**Personal Details**

<b>Title</b>			
<b>First name</b>		<b>name you are known as (if different)</b>	
<b>Last name</b>		<b>previous last name(s)</b>	
<b>Address</b>			
	Post code		
<b>Preferred telephone number</b>		<b>email</b>	
<b>We will contact you by email. Please tell us here if you would like us to contact you by telephone or post</b>			

	Yes	No		Yes	No
<b>Are you eligible to work in the UK or EEA?</b>			<b>Do you hold a current driving licence?</b>		
<b>Do you require a work permit to work in the UK?</b>			<b>Do you have access to a car which you could use for work if required?</b>		
<b>How did you find out about this vacancy? (if newspaper, website or journal please tell us which one)</b>					

Please note: A disclosure may be requested from the Disclosure & Barring Service (DBS) for successful candidates. This is a mandatory requirement for some positions within Redbridge Institute.

## Employment History

*please give details of all your employment history – use additional pages if necessary  
make sure you cover every year since you started work – give details of any gaps*

Your current job - or your most recent job if you are not currently working			
Name of employer			
Address of employer			Employer Telephone Number
	Post code		
Your job title		Your current or final salary	
Your start date with this employer (month/year)		How much notice do you have to give (if still working)	
Reason for leaving if you have left			
Brief description of duties			

Your previous job (this should be the one before the job listed above)			
Name of employer			
Address of employer			Employer Telephone Number
	Post code		
Your job title			
Your start date with this employer (month/year)		Your final salary	
Your end date with this employer (month/year)		Reason for leaving	
Brief description of duties			

**Your previous job (this should be the one before the job listed above)**

Name of employer			
Address of employer			Employer Telephone Number
	Post code		
Your job title			
Your start date with this employer (month/year)		Your final salary	
Your end date with this employer (month/year)		Reason for leaving	
Brief description of duties			

**Your previous job (this should be the one before the job listed above)**

Name of employer			
Address of employer			Employer Telephone Number
	Post code		
Your job title			
Your start date with this employer (month/year)		Your final salary	
Your end date with this employer (month/year)		Reason for leaving	
Brief description of duties			

**Your previous job (this should be the one before the job listed above)**

Name of employer			
Address of employer	Post code		Employer Telephone Number
Your job title			
Your start date with this employer (month/year)		Your final salary	
Your end date with this employer (month/year)		Reason for leaving	
Brief description of duties			

**Your previous job (this should be the one before the job listed above)**

Name of employer			
Address of employer	Post code		Employer Telephone Number
Your job title			
Your start date with this employer (month/year)		Your final salary	
Your end date with this employer (month/year)		Reason for leaving	
Brief description of duties			

**Please provide details of any gaps in employment history – with dates (use separate page if necessary)**

Dates of gaps	Reason

**Please tell us how many days you have been absent from work due to sickness in the last 2 years**

Total days		number of occasions	
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**Referees**

*Please give details of 2 referees. Both should be employment references.*

*If you are unable to provide employer references, please say why*

Referee's name		Job title	
Referee's company			
Company address			
	Post code		
Email		Telephone	
Your relationship to the referee		If this is not an employer reference please say why	

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## Education and Qualifications

*Please put your highest qualifications first*

Secondary school/college/university	Dates		Qualifications gained	grades
	From	To		

## Professional Qualifications/Registrations

*Please provide details of any professional qualifications & membership of professional institutes*

Name of professional body	membership grade and number	date obtained (if relevant)

## Recent training courses attended


## Supporting Statement and Achievements

Please use this space to tell us how you meet each of the points on the person specification. We need to have this information in order to consider your application. Please attach additional information if you require more space.

## Disability

The Disability Discrimination Act protects people with disabilities from unlawful discrimination. To meet the Act's definition, a person must have, or have had a physical or mental impairment, which had substantial long-term effects on their ability to carry out normal day to day activities. If we know you have a disability we will make adjustments to the working arrangements and/or the working environment provided it is reasonable in the circumstances to do so.

Do you have a disability you wish us to know about at this stage?    Yes     No

Please let us know what access requirements you have:

### TWO TICKS SCHEME

We welcome enquiries from everyone and value diversity in our workforce.

As a member of the Two Ticks – Positive about Disable People Scheme, we encourage applications from disabled people. We guarantee an interview for all disabled candidates who meet the minimum criteria of the job description and to consider these applicants on their abilities.

If you feel that this applies to you, please tick the

## Declaration

Are you related to, or have a close personal relationship with any councillor, council/Institute employee or governor of Redbridge Institute?    Yes     No

If Yes, please state their name and the position they hold

Name	Position held
Name	Position held

## Data Protection

Redbridge Institute intends to fulfil all of its obligations under the Data Protection Act 1998 (the Act). Redbridge Institute will ensure that all processing of data falling within the Act is appropriately notified to the Information Commissioner. Individuals whose information is held and processed by Redbridge Institute can be assured the information will be maintained in confidence and treated with all due care. Redbridge Institute tries to keep information held about you accurate and up-to-date. However, if you find any inaccuracies you have the right to have them corrected.

I understand that providing misleading or false information/qualifications will disqualify me from appointment or if appointed, may lead to disciplinary action and dismissal.

**I authorise Redbridge Institute to check the information supplied and hold all such information in both paper and electronic formats.**

If you are successful in your application you will be asked to sign this declaration.

Signature ..... Date .....

This form, when completed, to be returned to: [staffing@redbridge-iae.ac.uk](mailto:staffing@redbridge-iae.ac.uk)

**Or post to:**

**Staffing Section, Redbridge Institute of Adult Education, Gaysham Avenue, Gants Hill, Ilford, IG2 6TD**



## Declaration of Offences

Before completing this form, please read the following notes carefully

EXEMPT

### Rehabilitation of offenders Act 1974

This post is exempt from the above Act, as the nature of the job falls within the type of work excluded from the Act by the 1975 and 2001 Exceptions Amendment.

This means you must declare on this form all offences, convictions, cautions, bindovers or any court cases you may have pending.

Convictions will not necessarily be a bar to employment with Redbridge Institute.

Have you ever been cautioned or convicted of a criminal offence?

Have you ever been disqualified from working with children or vulnerable adults?

Do you have any unspent criminal convictions or cautions?

If you fail to disclose any criminal convictions or cautions, including those spent, it could result in withdrawal of the job offer, dismissal or disciplinary action.

If you do not have any, please write none.

Details of offence(s)	Place and date of Judgement(s)	Sentence(s)

Possession of a conviction or caution will not necessarily mean that you won't be appointed, each case is considered on its merits. All information given will be treated in the strictest confidence and will be used for this job application only.

I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may after appointment, lead to disciplinary action, which could lead to my dismissal without notice.

Name: (please print)

Signed:

Date:

Please complete this form and return it with your application form.

## Workforce Monitoring

In line with Codes of Practice issues by the Equal Opportunities Commission and the Commission for Racial Equality and as required by the Audit Commission, Redbridge Council collects and maintains information on the gender, ethnic origin and disabilities of its employees.

It will be appreciated if you will complete this section of the application form which will be separated from the rest of the form before shortlist selection takes place.

You can be assured that this information will be treated in confidence and will not be available to shortlisting officers or interviewers.

1. Gender                      Male                          Female   

2. What is your ethnic group?

Please choose one selection from A to E and then tick the appropriate box within your chosen section to indicate your cultural background.

A. White

<input type="checkbox"/>	British	<input type="checkbox"/>	Irish
		<input type="checkbox"/>	Any other White Background

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B. Mixed

<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>	White and Black African
<input type="checkbox"/>	White and Black Asian	<input type="checkbox"/>	Any other Mixed Background

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C. Asian or Asian British

<input type="checkbox"/>	Indian	<input type="checkbox"/>	Pakistani
<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Any other Asian Background

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D. Black or Black British

<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	African
		<input type="checkbox"/>	Any other Black Background

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E. Chinese or other Ethnic Group

<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Any other Background
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3. Do you consider that you have a disability as defined by the Disability Discrimination Act 1995? This means that any long term illness; health problem or disability that limits your daily activities or the work you can do. Please indicate:                      Yes                          No   

4. Date of Birth