STRICTLY PRIVATE AND CONFIDENTIAL



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CATERS SUPPORT PLEASE COMPLETE THIS FORM IN BLACK INK OR TYPESCRIPT AND RETURN IT TO:-

PLEASE e-mail the form to liz.johns@dccarers.org

including your name in the subject title.

APPLICATION FOR EMPLOYMENT

Durham County Carers Support Enterprise House Meadowfield Avenue Spennymoor Co Durham DL16 6JF Tel: 0300 005 1213

Please read the guidance notes before completing the application form.

POST TITLE:		
Surname:	Forename (s)	
Address:	Telephone No. Home:	
	Telephone No. Work:	
	Mobile No:	
	E- mail address:	

PRESENT EMPLOYMENT Post title: Name and Address of Employer: Grade: Salary / Wage: Date of Appointment: Period of notice required:

PREVIOUS EMPLOYMENT (start with most recent first and please account for any gaps in employment)					
FROM	ТО	EMPLOYER	POSITION	SALARY	REASON FOR LEAVING

SECONDARY EDUCATION

Schools attended	Dates Qualifications (including subjects and grad		

Establishment attended	Dates	Course	Result

MEMBERSHIP OF PROFESSIONAL / TECHNICAL BODIES				
MEMBERSHIP REFERENCE NO.				
Professional / Technical body	Class of Membership	Date obtained		

Please use this space to give further details of career, experience and private interests relevant to your application. Please continue on a separate sheet if necessary.

REFEREES

Please give the names and addresses of two persons who are not related to you and from whom references can be obtained. One of these MUST be your current or last employer. Referees may be contacted prior to interview. Please ensure that you provide all the details required below (if applicable) and that your referees are aware they will be contacted if you are offered the position.

Status:	Status:
Name:	Name:
Name.	Name.
Address:	Address:
Telephone no:	Telephone no:
Fax no:	Fax no:
E-mail address:	E-mail address:

ADDITIONAL INFORMATION

Durham County Carers Support is committed to the principle of making appointments on merit and will focus on a person's abilities, skills, experience and qualifications. When considering an applicant with a criminal record Durham County Carers Support will consider the relevance of the conviction to the job for which the person is applying and a record will not necessarily be a bar to obtaining a position. Durham County Carers Support has adopted a policy on the recruitment of ex-offenders, a copy of which is enclosed with this application form

Have you been convicted of an offence?

If 'Yes' please specify giving dates:

Under the provisions of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975, applicants are required to disclose information concerning convictions including those which for other purposes are regarded as spent under the Act. Any information disclosed will be treated in the strictest confidence.

DISABILITY

Durham County Carers Support is positive about disability and welcomes disabled people to apply for posts within the Organisation.

Do you consider yourself to be a person with a disability, as described by the Equality Act 2010? *i.e.* Do you consider yourself to be someone who has a physical or mental impairment which has a substantial and long term effect on your ability to carry out normal day-to-day activities

If Yes, please give details (please see the guidance notes for further information).

If you have any specific requirements to assist you with an interview, please attach details and reasonable adjustments will be made.

DRIVING ABILITY

Do you hold a current driving licence in accordance with the requirements of the post?

Have you had any endorsements within the last 5 years?

Do you have a roadworthy vehicle?

Are you related to any Employee or Trustee of this Durham County Carers Support?

(If you have a partner who is an Employee or Trustee of Durham County Carers Support you should also disclose that relationship)

If Yes, please give details

Please note:- Canvassing of Employees and Trustees of Durham County Carers Support directly or indirectly in connection with this application will disqualify you.

Have you previously worked for Durham County Carers Support?

DECLARATION

If you submit this form via email you are declaring that the information stated is true and accurate.

I declare that the information given in this application is true, and that I have not canvassed directly or indirectly any Employee or Trustee of Durham County Carers Support, nor will I do so. I understand that any falsification of information will be judged as serious misconduct and may result in dismissal.

Name

Date

Equality Monitoring Form

Durham County Carers Support is an Equal Opportunities Employer and the aim of its policy is to ensure that no applicant or employee receives less favourable treatment on the grounds of a protected characteristic, or perception of or by association with a protected characteristic. We need to find out if our policy is working in practice. To do this we need to look at, how we advertise the jobs, how we select people for interview, who is offered the job, and what to do after a successful interview. Monitoring the recruitment and selection procedures is one way of helping to ensure there is no discrimination in the way we recruit people.

How you can help us. We need to know the age, marital status, disability, gender, race and ethnic origin of people who apply to work for Durham County Carers Support. We would like you to complete the following questionnaire.

The information you give us will be treated as strictly confidential and will not form part of the appointment process.

Post	t Title Closing Date:					
1. My	y sex is: - Male 🗌 Female 🗌					
2. My	2. My age is: - 16-19 20-29 30-39 40-49 50-59 60+					
3. Da	3. Date of Birth :-					
4. Ar	re you married or in a registered civil partnership?					
5. Do	o you consider yourself to be a person with a disability as c	lescri	bed by the Equality Act 2010			
6. Or	n what employment basis are you applying for the post?		Full time 🔲 Part time 🗌 Job Share 🗌			
7. Ar	re you already employed by Durham County Carers Suppor	t?				
8. W	hat is your ethnic group?					
Choose one selection from (a) to (e) and then tick the appropriate box.						
(a)	White	(d)	Black or Black British			
	British		Caribbean			
	Irish		African			
	Any other White background		Any other Black background			
	Please write in below		Please write in below			
(b)	Mixed	(e)	Chinese or other ethnic group			
	White and Black Caribbean		Chinese			
	White and Black African		Any other			
	White and Asian					
	Any other Mixed background		Please write in below			
	Please write in below					
(c)	Asian or Asian British					
	Indian					
	Pakistani					
	Bangladeshi					
	Any other Asian background					
	Please write in below					

9. Where did you learn of this vacancy?

Please print your full name ... Date

This document will not be used as part of the selection process, and will be kept separate from your application form. The information you provide will be treated in the strictest confidence and will not be available to members of the appointment panel.