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| Please complete the application form and answer as completely and succinctly as you can. *Please do not include additional sheets or CV.*Please return the application form electronically to: info@dapwales.org.uk**Or post to:** Building a Better Future,  Disability Advice Project, 9 Caldicot Way, Cwmbran, NP44 1UG |

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| **Position applied for** |  |
| **How did you hear of this post?** |  |

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| --- |
| **Personal details** |
| Surname |  | Known as? |
| Forename(s) |  |
| Preferred title | E.g. Mr / Ms / Mrs / Dr / other |  |
| Address |  |
| Post code |  |
| Phone numbers | Daytime |  |
| Evening |  |
| Mobile |  |
| E-mail address |  |
| Do you hold a current full driving licence? Yes / No |  |

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| **Asylum and Immigrations Act 1996** |  |  |
| Do you require a work permit to work in the UK?  | Yes  | No |
| It is a criminal offence to employ persons whose immigration status prevents them from working in the United Kingdom. Prior to appointment, you will be required to provide evidence of a passport or other documents on the approved list to satisfy DAP that the Asylum and Immigrations Act 1996 is being complied with. |

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| **Education/training** |
| School/college/university | Subjects | Qualifications/grades |
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| **Professional memberships/qualifications** |
| Institute | Qualification/membership grade |
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| **Please tell us why you think you should be considered for this position and demonstrate how you meet the requirements of the job description/person specification form. (No more than 500 words)** |
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| **Other skills**(Please list any occupational skills, any attainments, languages, skills etc.) |
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| **Hobbies and interests**(Please describe briefly) |
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| **Employment Details** |
| Current or most recent job title |  |
| Name and address |  |
|  | Date commenced |
|  | Present salary |
|  | Period of notice (if required) |
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|  |  |
| Duties |
|  |
| Reason for leaving /wishing to leave |
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| **Previous employment (last 10 years).** Please start with your most recent employer, and include part time, unpaid work and any break in your employment.  |
| Dates from – to | Name and address of employer | Job title / details | Reason for leaving |
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| **References** |
| Please give full details of two referees who we can approach in support of your application. One of which should be your current / most recent line manager in your current / most recent employment |
| **Referee 1** |  |
| Name |  |
| Position |  |
| Address |  |
| Telephone number |  |
| E-mail address |  |
| The capacity in which you are known to this person |  |
| The length of time they have known you |  |
| Can we contact them prior to job offer? Yes / No |  |
|  |  |
| **Referee 2** |  |
| Name |  |
| Position |  |
| Address |  |
| Telephone number |  |
| E-mail address |  |
| The capacity in which you are known to this person |  |
| The length of time they have known you |  |
| Can we contact them prior to job offer? Yes / No |  |

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| **Equality Act** |
| DAP welcomes applications from people who have any characteristics that fall within the Equality Act 2010 |
| Do you have a condition that falls within the Equality Act 2010? | Yes / No |
| If yes, please give details including any support you would benefit from in order to undertake this role: |
|  |
| Please also advise what support, if any, you may require to attend an interview |
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| **Welsh language skill level** (mark with an x as appropriate) |
|  | Speaking | Reading | Writing |
| None |  |  |  |
| A Little |  |  |  |
| Fairley well |  |  |  |
| Fluent |  |  |  |

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| **Due to the nature of the work in DAP, the trustees have determined that depending on the role applied for, you may be required to undertake a Disclosure and Barring Scheme check. Please note that declaration of a criminal offence will not necessarily bar you from employment. However, failure to declare a conviction spent or unspent will.** |
| Have you ever been convicted of a criminal offence? | Yes / No |
| If yes, please give details below |
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| **Data Protection Act** |
| The information you provide will be processed in accordance with the Data Protection Act 2018.The application form is used for short-listing, interviewing and monitoring purposes. If you are not appointed, your form will be destroyed via confidential shredding.The successful applicant’s application form will form part of a personal file which will be retained in a secure environment. |
| I confirm that the information that I have provided is accurate and true. I understand that any false or misleading information and/ or omissions concerning criminal convictions may disqualify my application or may render my Contract of Employment, if I am appointed, liable to dismissal without notice and may lead to the withdrawal of any offer of employment |
| Signature | Date |

**RECRUITMENT MONITORING**

In the interests of monitoring our recruitment procedures we would be grateful if you could complete this form, it is however voluntary. In accordance with our Privacy Notice, all data will be securely stored and handled appropriately, it will only be used for the reason it is intended.

This document will be separated from the application form and will not be part of the selection process.

*Please tick as appropriate:*

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| **Gender** |
| 🞏 Male |
| 🞏 Female |
| 🞏 Prefer not to say |
| 🞏 Prefer to use my own terms (please state) |

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| Ethnicity |
| 🞏 Arab | 🞏 Mixed: White and Black Caribbean |
| 🞏 Asian or Asian British: Indian | 🞏 Mixed: White and Black African |
| 🞏 Asian or Asian British: Pakistani | 🞏 Mixed: White and Asian |
| 🞏 Asian or Asian British: Bangladeshi | 🞏 Mixed: Other |
| 🞏 Asian or Asian British: Chinese | 🞏 White: British |
| 🞏 Asian or Asian British: Other | 🞏 White: Irish |
| 🞏 Black or Black British: African | 🞏 White: Gypsy or Irish Traveller |
| 🞏 Any other | 🞏 Prefer not to say |

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| Do you have a disability as defined under the Disability Discrimination Act?  (de |
| *(defined as a physical or mental impairment which has a substantial and long-term adverse effect on your ability carry out normal day-to-day activities)* |
| 🞏 Yes |
| 🞏 No |
| Please provide details separately of any special or additional arrangements you would require if invited to interview:  |

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| --- |
| What age group do you belong to? |
| 🞏 Under 25 | 🞏 36 - 50 |
| 🞏 26 - 35 | 🞏 Over 50 |
| 🞏 Prefer not to say |  |

Thank you for completing this form.