

Job Application Form

Part 1

This section of the application form will not go to the panel as part of the shortlisting process; it will be kept separate by HR.

| | |
|------------------------------------|--|
| Position applied for: | |
| Candidate number: (HR to complete) | |

Your details:

| | | | |
|----------------|--|-------|--|
| Title | | | |
| Full Name | | | |
| Preferred Name | | | |
| Address | | | |
| Postcode | | | |
| Mobile | | Home: | |
| Email | | | |

Eligibility to work in the UK:

| | | | | |
|---|-----|--|----|--|
| Are you eligible to work in the UK and provide documentation? | Yes | | No | |
| Are you required to have a work visa? | Yes | | No | |

Safeguarding:

STC Sheffield is committed to safeguarding as an integral part of the activity of the charity. We believe everyone who participates with STC Sheffield's activities is responsible for promoting a safe place whether they directly work with adults at risk or children or not.

The job pack will tell you whether this role is eligible for a police check and whether the role involves regulated activity.

If your role does not require a police check, you are not obliged to complete this section so any information you do give will be voluntary.

| | | | | |
|--|-----|--|----|--|
| Have you ever been convicted of a criminal offence which is not a 'spent' conviction under the Rehabilitation of Offenders Act (1974) in the UK? | YES | | NO | |
| If Yes, please provide further details: | | | | |

If you would prefer to discuss this question over the phone, please contact the HR Team or Safeguarding Coordinator.

Disability

STC Sheffield encourages applications from people with disabilities, or those with health problems, who meet the essential criteria and will be given full consideration. Reasonable adjustments will be made available should you be invited to interview.

| | | | | |
|---|-----|--|----|--|
| Do you have a disability under the definition of the Equality Act 2010? | Yes | | No | |
| If YES, please give details and indicate whether you would need any help or special equipment to enable you to carry out the duties outlined in the job description, to attend for interview, or to participate in the recruitment process for the post. If you prefer to call HR to discuss this, please feel free. | | | | |

Diversity Monitoring:

STC Sheffield is committed to equal opportunities and we see diversity as a strength. Therefore, we are keen to monitor diversity across our people so we can continue to develop and improve our practice and policy. Completion of this section is voluntary, and the information you supply will be kept confidential and stored securely. The information supplied is not shared outside of HR and does not form part of the shortlisting process.

Please tick the appropriate boxes:

| | |
|-----|--|
| Age | <input type="checkbox"/> 16 - 24 <input type="checkbox"/> 25 - 34 <input type="checkbox"/> 35 - 44 <input type="checkbox"/> 45 - 54 <input type="checkbox"/> 55 - 64 <input type="checkbox"/> 65+ |
|-----|--|

| | |
|--|--|
| <p>What best describes your gender?</p> | <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer to self-describe: <input type="checkbox"/> Prefer not to say |
| <p>How would you describe your sexual orientation?</p> | <input type="checkbox"/> Bisexual <input type="checkbox"/> Gay man <input type="checkbox"/> Gay woman/ lesbian <input type="checkbox"/> Heterosexual/straight <input type="checkbox"/> Prefer to self-describe: <input type="checkbox"/> Prefer not to say |
| <p>How would you describe your ethnic origin?</p> | <p>Asian or Asian British</p> <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Other (Please specify) <p>Black or Black British</p> <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Other (Please specify) <p>Mixed</p> <input type="checkbox"/> Asian and White <input type="checkbox"/> Black African and White <input type="checkbox"/> Black Caribbean and White <input type="checkbox"/> Other (Please specify) <p><i>(continued overleaf...)</i></p> |

| | |
|--|---|
| | <p>White</p> <p><input type="checkbox"/> British</p> <p><input type="checkbox"/> English</p> <p><input type="checkbox"/> Gypsy or Irish Traveller</p> <p><input type="checkbox"/> Irish</p> <p><input type="checkbox"/> Northern Irish</p> <p><input type="checkbox"/> Scottish</p> <p><input type="checkbox"/> Welsh</p> <p><input type="checkbox"/> White European</p> <p><input type="checkbox"/> Other (Please specify)</p> <p><input type="checkbox"/> Other Ethnic Group Please specify</p> <p><input type="checkbox"/> Prefer not to say</p> |
| <p>How would you describe your religion or belief?</p> | <p><input type="checkbox"/> No religion or belief</p> <p><input type="checkbox"/> Buddhist</p> <p><input type="checkbox"/> Christian/Catholic (All denominations)</p> <p><input type="checkbox"/> Hindu</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Muslim</p> <p><input type="checkbox"/> Sikh</p> <p><input type="checkbox"/> Other (Please specify)</p> <p><input type="checkbox"/> Prefer not to say</p> |

| | |
|---|---|
| <p>Do you consider yourself to have a disability or long-term health condition?</p> | <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Prefer not to say</p> <p>If you have answered yes, please indicate the type of impairment / condition which applies to you. We recognise that people may have more than one type of impairment / condition, in which case please mark all that apply.</p> <p><input type="checkbox"/> Physical impairment/condition</p> <p><input type="checkbox"/> Mental Health impairment/condition</p> <p><input type="checkbox"/> Learning impairment/condition</p> <p><input type="checkbox"/> Long-term injury or health condition</p> <p><input type="checkbox"/> Other (Please specify)</p> <p><input type="checkbox"/> Prefer not to say</p> |
|---|---|

Declaration:

I confirm that:

- The information provided in this application is true and correct to the best of my knowledge.
- I understand any false knowledge may disqualify my application.
- I have read the STC Sheffield Recruitment Privacy Notice and consent to STC Sheffield processing my data as set out in the notice.
- I consent to STC Sheffield processing my data including any “sensitive data” as is necessary to do so during the recruitment and selection process.

Signed: Date:

Part 2

| | |
|------------------------------------|--|
| Position applied for: | |
| Candidate number: (HR to complete) | |

Employment History:

Please list your full employment history (employments lasting 3 months or more) beginning with the most recent; continue on a separate sheet if needed.

| Date From | Employer | Job Title and summary of duties | Location | Reason for leaving (if applicable) |
|-----------|----------|---------------------------------|----------|------------------------------------|
| | | | | |
| Date to | | | | |
| | | | | |

| Date From | Employer | Job Title and summary of duties | Location | Reason for leaving |
|-----------|----------|---------------------------------|----------|--------------------|
| | | | | |
| Date to | | | | |
| | | | | |

| Date From | Employer | Job Title and summary of duties | Location | Reason for leaving |
|-----------|----------|---------------------------------|----------|--------------------|
| | | | | |
| Date to | | | | |
| | | | | |

| Date From | Employer | Job Title and summary of duties | Location | Reason for leaving |
|-----------|----------|---------------------------------|----------|--------------------|
| | | | | |
| Date to | | | | |
| | | | | |

| Date From | Employer | Job Title and summary of duties | Location | Reason for leaving |
|-----------|----------|---------------------------------|----------|--------------------|
| | | | | |
| Date to | | | | |
| | | | | |

Are there any periods of non-employment that you would like to tell us about?

Education and Qualifications:

Please list in chronological order, continue on a separate sheet if needed.

| Place of Study | Qualifications Gained | Date |
|----------------|-----------------------|------|
| | | |

Please give details of any professional bodies you are a member of:

| Professional Body | Membership Type | Membership No |
|-------------------|-----------------|---------------|
| | | |

Reason for Applying:

| | |
|--|--|
| Why do you want to work for STC Sheffield? | |
| What motivated you to apply for this role? | |
| Where did you see this post advertised? | |

Please use this section to tell us how you meet the criteria set out in the job description/person specification. This can include relevant skills, knowledge, past experience, achievements and voluntary activities. You should give as full an answer as possible addressing each of the points in the job description/ person specification.

Relevant information:

| | |
|--|--|
| How much notice do you need to give? | |
| When would you be able to commence employment with us? | |

References:

Offers of employment are offered subject to two satisfactory references. The JD will state what sort of references these should be (i.e. employment/personal or faith). Relatives are not an acceptable reference. We will not contact your references without your permission.

Reference 1

| | |
|-----------------------------------|--|
| Name | |
| Relationship to you | |
| Email address | |
| Phone number | |
| Job Title (if employment related) | |

Reference 2

| | |
|-----------------------------------|--|
| Name | |
| Relationship to you | |
| Email address | |
| Phone number | |
| Job Title (if employment related) | |

Please return both parts of this application form to joe.ovenden@stcsheffield.org

STC Sheffield will try to acknowledge receipt of all applications where possible.