

Please complete in black pen. Do not enclose a C.V. or additional documents as these will not be considered

All sections of the form must be completed. You may attach continuation sheets if necessary. This form is available, on request, in large print, Braille, on tape or in electronic format

Ref number:

	you read the City of York Council's policy statement on the Recruitment of Ex uded in the 'How to apply' guidance, before submitting your application:
I confirm I have	read the Recruitment of Ex Offenders policy statement Yes
Personal	Details
Title	Surname
Forena	me Forename 2
Preferred na	Previous surname
NI num	ber
Address	Details
House Name	/Number
	Street
Area	Town/City
County	Postcode
	Country

Post applied for:

	etails – our and contact to	-			contact	is ema	ail. Plea	ase pro	vide an
Email address	5								
Telephone nu	mber								
Please pi	ent history	mploymen							
If you doUse addi	s of unemployment not have any pretional sheets to a	vious emp	oloyme	nt histo				mpioym	ent section.
Current	or last job title								
Employ	ment start date				Employn	nent en	nd date		
School/com	pany name and address								
	I type of School secondary etc.)								
Job details (please provide a brief description of the role)									
Reason for leaving									
Salary on]		

Start date	Date of leaving	Name and address of employer	Brief description of role	Reason for leaving	Salary on leaving

Employment history (contd)

Please use continuation sheet(s) if necessary.

Please account for any gaps with dates, of three months or more, in your employment history including any travel abroad below. State the start and end date of the gap and details:

Education and Qualifications

Employment history gaps

- Enter details from the most recent to the earliest.
- Also include all professional qualifications in this section
- Qualifications will be verified on appointment.
- Please use continuation sheet(s) if necessary.

Place of learning and institution type	Subject	Qualification level (e.g. GCSE/A Level)	Grade	Date of attainment

Professional memberships

Please give details of any professional <u>memberships</u> that are relevant to the post applied for, stating:

- professional body name
- your level of membership
- the date obtained and expiry or renewal date

your membership or registration number
Membership details
Training Please provide details of training and/or development courses you are undertaking or
have completed. Please include the date attended and where applicable, if you passe or failed the course.
Supporting Information

- Please use the following section to address each point on the skills and knowledge section of the Job Description. You should provide information, examples and evidence to illustrate how you feel you meet the criteria for the job.
- The length of this statement should be no longer than one A4 page of text.

Refere	nces				
• Pleas	se enter details of	two referees who	can provide a refe	rence. One of the	referees must be
				most recent emp	
Refe	rees should not be	e a relative and, id	eally, should both	be able to commer	it on your suitability

for this post.

• As this position involves working with vulnerable adults or children any number of previous employers may be contacted, *without seeking further permission* from you, as part of the vetting process, in relation to your employment history. This includes vetting of internal candidates.

Reference 1 (present or most recent employer) Title Surname Forename Reference Type **Email address** Telephone Company Name Position in company Contact address Reference 2 Surname Title Forename Reference Type Email address Telephone Company Name Position in company Contact address

Declarations of criminal records, cautions and convictions

Posts involving work which brings you in regular contact with children, vulnerable adults, people with disabilities and learning difficulties are exempt from the provisions of the Rehabilitation of Offenders Act 1974 (ROA).

applying for this p		ation about spent or unspent convictions or cautions when are protected convictions and cautions as described in as) Order 1975.
		spective employees through the Disclosure & Barring vill not necessarily prevent your employment.
Are you, or have y		children, young people or adults? om working with, or been included on a list of people barred or vulnerable adults?
	If yes please give details	
investigated and p	proven to be unsubstanti	oven/unproven investigations (other than those that were ated) in relation to your work with children, young people or untary capacity or carried out privately?
	If yes please give details	
	l	
	convictions, cautions, re	primands or final warnings that are not protected as defined 5 (as amended in 2013)?
No	If yes please give details	
Additional	details	

Guaranteed interview scheme

We guarantee, under the 'Positive about Disabled People' scheme, an interview for all applicants with a disability who meet the minimum criteria for the job. You must provide us with evidence in your application form which demonstrates that you generally meet the level of competence required for each element within the skills and knowledge section of the job description.
Are you a disabled person applying on that basis?
Job share (Please note Job sharing is different to part time working)
The City of York Council welcomes individuals to apply on a job share basis (unless it has been specified within the job advert that the role is unsuitable for job share). Please indicate below if you are applying on a job share basis.
Are you applying for this post on a job share basis?
Relationship with the council Are you related to any employee of City of York Council or do you have any substantial connection with any employee of City of York Council?
Please give details
Applicant status
For monitoring purposes please indicate if you are already an employee of the City of York Council (If you work for Explore or Veritau you are not a CYC employee).
Availability for interview Please indicate any dates on which it would be impossible for you to attend an interview. Whilst the dates you provide will be taken into consideration, please note that it may not be possible to accommodate everyone's request when arranging interviews.
Unavailable dates
Eligibility to work in the UK Do you need permission to work in the UK?
If your permission is limited, please provide full details of your immigration status, renewal dates and any other relevant information.

How did you hear ab	out this job
Declaration	
best of my knowledge and qualifications, experience release by other people of understand my applications.	tion given in this form and in any accompanying documentation is true to the d belief and give my permission for enquiries to be made to confirm, dates of employment, right to work in the UK, registrations and for the or organisations of necessary information to verify the content. On may be rejected and/or I may be dismissed following appointment if I hisleading information or have withheld any relevant details.
Signed	
Print name	
Date	
Consent	
	tection Regulations we are obliged to ask for your consent for us to ills you have supplied on your application form.
	happy for us to contact you about your application, via the details provided for purposes of the Recruitment & Selection process.
•	ed to contact you for feedback regarding the Recruitment & Selection if you are happy for us to do this.
You have the right to with	draw your consent for us to process your data at any time.

Equal Opportunities Monitoring

The equal opportunities information provided will be treated in confidence and used only for monitoring purposes. It is not used as part of the selection process and the recruiting panel do not have access to any of this information.

Equal Opportunities Monitoring (confidential)

City of York Council is committed to equality and aims to ensure that everyone who works or applies to work for us is treated fairly and is not subjected to unlawful discrimination on grounds of their sex, age, race, ethnic or national origins, marriage or civil partnership, pregnancy and maternity, gender reassignment, sexual orientation, religion or belief, family responsibility, disability or political beliefs. Applications are welcome from all sections of the community.

Thank you for helping us to continue to improve our policies and practices.

Post applied for	Ref Number	
Sexual identification:		
Do you identify yourself as trans?		
Date of Birth:	Nationality:	
Sexual orientation:		
Marital status		
Religion		
Ethnic Origin		
Equal Opportunities Monitoring	(confidential)	
Disability information		
The Equality Act 2010 states that someone is disabled that has a 'substantial' and 'long-term' adverse effect of Please see 'How to apply' guidance for further information.	on their ability to do normal daily activiti	
Do you consider yourself to be disabled?		
If you tick "Yes", please tick as many boxes below as	apply:	
Physical impairment (such as using a wheelchair legs etc)	to get around and / or difficulty using a	rms,

□ Sensory impairment (such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment) □ Mental health condition (such as depression or bipolar) □ Learning disability (such as Down's syndrome or dyslexia or cognitive impairment such as autism or one resulting from head-injury) □ Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy) □ Other please gives details
Carer responsibilities
City of York Council values and embraces all people, regardless of any caring responsibilities that they may have, and strives to ensure that all people are treated with dignity and respect. A carer is defined as someone who looks after family, partner or friends in need of help because they are ill, frail or have a disability and that the help they provide is unpaid (except for Carers Allowance).
Are you a carer for family/friends?
If yes please tick the appropriate box: Carer for: Elderly relative Friend Relative Young relative (under 18yrs) N/A
Armed Forces Community To enable us to monitor applications from the Armed Forces community please indicate if you are part of this. Are you a member of the armed forces community?
No
If yes please tick the appropriate box:
☐ Reservist☐ Veteran☐ Bereaved☐ Regular personnel☐ Family of regular personnel, reservists or veterans