For Office Use Only:						
Post Applied for: Drop in Manager						
Job Application Form						
Closing Date:  9am Mon 18 <sup>th</sup> March 2019 Date:  Mon 25 <sup>th</sup> March 2019						
THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.						
Section 1 Personal details						
Last Name:  First Name:						
Address:						
Postcode:						
Contact Telephone Number:						
Mobile Telephone Number:						
E-mail address:						
Are you free to remain and take up employment in the UK with no current immigration restrictions?						
If you are successful you will be required to provide relevant evidence of the above details prior to your appointment.						

Section 2 Current	or Most Rece	nt Emp	ployment		
Name of Employer:					
Address:					
Postcode:					
Post Title:					
Start date:					
Brief description of duties:					
Period of Notice (if ap	oplicable):				
Leaving Date (if appli	cable):				
Reason for leaving (if	applicable):				
Current salary:		£	per annum pro rata (if applicable)		

# **Previous Employment (Most recent first)** Section 3 Please give details of paid and any relevant unpaid volunteer roles. Name of Employer: Address: **Postcode Position Held: Dates worked: Brief description of duties:** Reason for leaving: Name of Employer: Address: **Postcode Position Held: Dates worked: Brief description of duties:** Reason for leaving:

Name of Employer:					
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Address:					
	Postcode				
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Position Held:					
Dates worked:					
Brief description of du	ties:				
Reason for leaving:					
Name of Employer:					
Address:					
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Name of Employer:						
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Dates worked:						
Brief description of duties:						
Reason for leaving:						
Name of Employer:						
Address:						
Address:						
	Postcode					
Position Held:						
Dates worked:						
Brief description of duties:						
Reason for leaving:						
Continue on a separate	sheet if necessary					

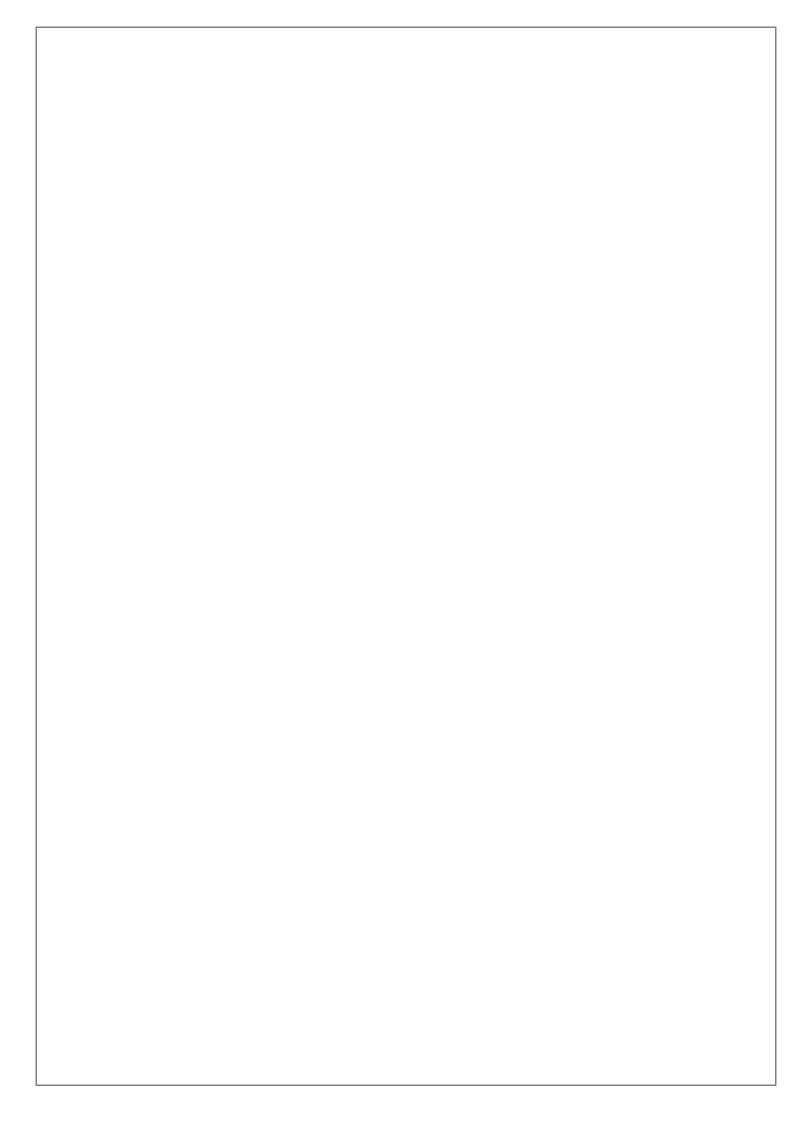
### Section 4 Education and Training

Please give details of any qualifications obtained from Universities, Colleges and Schools and training courses which are relevant to your application, in chronological order starting with the most recent.

University/College/School/Other	Course	Qualifications and Grades Obtained and Dates
Title of Training Programme o	r Course and qualification if any	Duration and Dates

Continue on a separate sheet if necessary

# Section 5 **Personal Statement** Abilities, skills, knowledge and experience. Using the **Person Specification** as a guide, please outline how your experience, skills and achievements are relevant to this post and how they meet the requirements of the **Job Description**. Please limit your response to no more than 2 pages of A4



Action Foundation works with vulnerable adults. In seeking to safeguard them, staff are required to have Disclosure and Barring Service checks to ensure their suitability for this post.  Do you have any convictions  Yes  No					
Do you have any convictions					
Do you have any convictions					
Are you aware of any police enquires undertaken following allegations made against you, which may have a bearing on Yes No your suitability for this post?					
Section 7 Disability Discrimination Act					
This Act protects people with disabilities from unlawful discrimination. The Disability Discrimination Act defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long term effect on his or her ability to carry out normal day to day activities.					
Do you have a disability which is relevant to your application? Yes					
If yes, please give details:					
We will try to provide access, equipment or other practical support to ensure that people with disabilities can compete on equal terms with non-disabled people.					
Do we need to make any specific arrangements in order for you to attend the interview?					
Do we need to make any specific arrangements in order for you					
Do we need to make any specific arrangements in order for you Yes No South					
Do we need to make any specific arrangements in order for you Yes No					

## **Section 8** References

Please give the names and addresses of two referees; one should be your most recent employer if applicable. Please do not give members of your family.

	Reference 1			Reference 2	
Name:			Name:		
Position:			Position:		
Relationship:			Relationship:		
Organisation:			Organisation:		
Address:			Address:		
	Postcode			Postcode	
Telephone:			Telephone:		
Email:			Email:		
Are you willing for this referee to be approached prior to the interview?  Yes No			Are you willing for this referee to be approached prior to the interview?		
Section 9 Declaration					
Statement to be Signed by the Applicant  All the information given by me on this form is correct to the best of my knowledge.					
Signed:			Date:		

### RETURNING THIS FORM

Please return the completed application and the Recruitment Monitoring Form to: Recruitment, Action Foundation, The CastleGate, Melbourne Street, Newcastle upon Tyne. NE1 2JQ

Or e-mail to recruitment@actionfoundation.org.uk APPLICATION DEADLINE - 9AM 18TH MAR 2019

# **Recruitment Monitoring Form**

Action Foundation is committed to ensuring that access to its services and opportunities for employment and volunteering is available to all sectors of the community. To do this, and to monitor the effectiveness of our equal opportunities policy and practice, the organisation needs relevant information about its current and prospective users.

We would therefore be very grateful if you would complete this form. Please note:

- the information you give is strictly confidential and will not influence your application
- the completion of the form or any part of it is entirely voluntary
- the questions are entirely about how you classify yourself

A.	A. Where did you first hear about this post?						
B.	What sex are you?	☐ Male	☐ Male				
C.	How would you describe your racial group / nationality?						
D.	D. Do you practice / believe a particular religion / faith? ☐ Yes ☐ No						
	If yes which religion / faith?						
E.	<b>E.</b> Do you consider yourself to have a disability? ☐ Yes ☐ No						
F.	<b>F.</b> What is your age bracket?						
	Under 16	□ 36-45	□ 46-55	□ 56-65	Over 65		
G.	G. Are you:						
	<u> </u>	nployed (Part-tim ident	e)	nemployed			

THANK YOU FOR COMPLETING THIS FORM