

**APPLICATION FOR EMPLOYMENT**

1. St. David’s Children Society is eager to ensure that no employee or applicant is disadvantaged on the grounds of gender, marital status, race or disability or by any conditions or requirements which cannot be shown to be justifiable and relevant to performance.
2. **General Data Protection Regulation 2018.** Some of the details on this form will be held and processed by St David’s Children Society on computer for a period of up to 12 months. The information will be used by St David’s Children Society only for the selection of candidates for job interviews. Information will not be passed on to a third party without permission.

**Please tick to give consent**

**POST APPLIED FOR:**

**For Office Use:**

Acknowledged Y/N References Y/N

Interviewed Y/N

As advertised in:

***Closing Date:***

2. **PERSONAL INFORMATION**

|  |  |
| --- | --- |
| Surname |  |
| Forenames |  |
| Address |  |
| Postcode |  |
| Telephone Number/s |  |
| Email |  |
| SCW Registration No. |  |

3. **MOST RECENT EMPLOYMENT**

|  |  |
| --- | --- |
| Employer |  |
| Job Title |  |
| Date of Appointment |  |
| Current Salary |  |
| Notice Period |  |

Please describe the main duties and responsibilities of this post:

1. **EMPLOYMENT HISTORY**

Please give details of all the employment in chronological order:

|  |  |  |  |
| --- | --- | --- | --- |
| **Employer/Agency** | **Dates (in full)** | **Posts** | **Responsibilities** |
|  |  |  |  |

5. **EDUCATIONAL AND PROFESSIONAL QUALIFICATIONS**

Please list all academic, vocational, professional and technical qualifications in chronological order of award. Where it is not obvious, please identify the awarding body:

|  |  |  |  |
| --- | --- | --- | --- |
| **School/College/University** | **From** | **To** | **Qualifications** |
|  |  |  |  |

Please list any in-service training undertaken over the past 3 years:

1. **REFERENCES**
2. **REFERENCES**

Please state the names and addresses of three persons from whom references may be obtained. One must be your current or most recent employer. In the absence of previous employment experience, a reference from your last place of full-time education will be a suitable alternative.

|  |  |
| --- | --- |
| Name of Referee 1 |  |
| Address (including postcode) |  |
| Telephone number/s |  |
| Email |  |
| Relationship to applicant |  |
| How long acquainted |  |
| Can this reference be taken up immediately? |  |

|  |  |
| --- | --- |
| Name of Referee 2 |  |
| Address (including postcode) |  |
| Telephone number/s |  |
| Email |  |
| Relationship to applicant |  |
| How long acquainted |  |
| Can this reference be taken up immediately? |  |

|  |  |
| --- | --- |
| Name of Referee 3 |  |
| Address (including postcode) |  |
| Telephone number/s |  |
| Email |  |
| Relationship to applicant |  |
| How long acquainted |  |
| Can this reference be taken up immediately? |  |

7. **GENERAL**

|  |  |
| --- | --- |
| Do you hold a current driving licence? | YES/NO |
| Would you have use of a car for the purpose of this post? | **YES/NO** |
| Are you related to any member of the Agency’s governing body or staff? If yes please state relationship | **YES/NO** |
| * *The post for which you are applying is considered exempt from the REHABILITATION OF OFFENDERS ACT 1974 s 4(2) by virtue of the REHABILITATION OF OFFENDERS ACT 1974 (EXEMPTIONS) ORDER 1975. Candidates are not entitled to withhold information about convictions which for other purposes are ‘spent’ and, in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action.*   Have you been convicted of any criminal offence  If you have please give details of all convictions (NB this includes motoring convictions), dates of convictions and sentences imposed. | **YES/NO** |

* *It is the policy of St. David’s to carry out a DBS check where it is appropriate for the post. This information will only be pursued with candidates whom the Agency wishes to appoint and any information given will be treated in the strictest confidence.*
* *Canvassing of members of the governing body or officers of the Agency will disqualify candidates.*

1. **STATEMENT IN SUPPORT OF APPLICATION**

Please evidence below how your experience meets the person specification criteria set out in the job description (continue on a separate sheet if necessary)

**To the best of my knowledge and belief, all the particulars I have given are true and complete. I understand that any false statement may disqualify me from employment or render me liable for summary dismissal.**

Signature ……………………………………………. Date …………………………………

**Please return the completed form to Wendy Keidan (CEO), St. David’s Children Society, 28 Park Place, Cardiff, CF10 3BA. Tel No. 029 2066 7007**

**Website:** [**www.adoptionwales.org**](http://www.adoptionwales.org)[**www.afacymru.org.uk**](http://www.afacymru.org.uk)

**Email:** [**info-afacymru@stdavidscs.org**](mailto:info-afacymru@stdavidscs.org)

**Reg. Charity No. 509163**

# Equal Opportunities Monitoring Form

In accordance with its equal opportunities statement, St David’s children Society will provide equal opportunities to all employees and job applicants and will not discriminate either directly or indirectly on the grounds of ethnic origin, nationality, religion, sex, disability, sexual orientation or age.

This monitoring form will help us to identify any groups of people that are under-represented by our Agency and give us an idea of where further work may be needed in the future. Forms are confidential. Completion of each section is voluntary, but your co-operation would be very much appreciated.

**General Data Protection Regulations 2018** Some of the details on this form will be held and processed by St. David’s Children Society on computer for a period up to 12 months. Information will not be passed onto a third party

Please tick to give consent

Please tick the relevant box in each of the sections below.

**Section 1**: Gender – are you

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Female |  | Male |  | Prefer not to say |  |

**Section 2**: Age – are you

16-19  20-24  25-39  40-59  60 and over  Prefer not to say

**Section 3**: Ethnic Group (background or culture) – I would describe myself as:

|  |  |  |  |
| --- | --- | --- | --- |
| White Welsh |  | Other (South) Asian |  |
| Other White British |  | Chinese |  |
| **White Irish** |  | Caribbean |  |
| Other White |  | African |  |
| Indian |  | Black Welsh and other Black  Sc |  |
| Pakistani |  | Mixed |  |
| Bangladeshi |  | Other |  |

**Section 4** Sexual Orientation – I would describe myself as:

|  |  |  |  |
| --- | --- | --- | --- |
| Heterosexual/straight |  | Bisexual |  |
| Gay man |  | Gay woman/lesbian |  |
| Other |  | Prefer not to say |  |

**Section 5** Language –what is your language of choice

|  |  |  |  |
| --- | --- | --- | --- |
| Welsh |  | English |  |
| Urdu |  | Punjabi |  |
| Arabic |  | Swahili |  |
| Chinese |  | French |  |
| Italian |  | German |  |
| Portuguese |  | Polish |  |
| Other |  |

**Section 6**: Disability – do you consider yourself to have:

|  |  |  |  |
| --- | --- | --- | --- |
| No disability or impairment |  | A sensory impairment |  |
| A learning disability |  | A physical impairment |  |
| A mental health condition |  | Any other disability or impairment |  |

**Note: The disability categories used are broadly based on the definition of a disabled person in the Disability Discrimination Act 1995 as “someone with a physical or mental impairment which has a substantial or long term effect upon his/her ability to carry out normal day to day activities”.**

**Section 7:** Marital Status – are you:

|  |  |  |  |
| --- | --- | --- | --- |
| Single |  | Married |  |
| Co-habiting |  | Separated |  |
| Divorced |  | Widowed |  |
| Prefer not to say |  |

**Section 8:** Religion – are you:

|  |  |  |  |
| --- | --- | --- | --- |
| Buddhist |  | Christian |  |
| Hindu |  | Jewish |  |
| Muslim |  | None |  |
| Other |  | Prefer not to say |  |

**Section 9:** Postcode