# APPLICATION FOR EMPLOYMENT *Confidential*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **POST APPLIED FOR:** | | | | | | |  | | | | | | | | |
| Where did you find out about this vacancy? | | | | | | |  | | | | | | | | |
|  | | | | | | |  | | | | | | | | |
| **PERSONAL DETAILS** | | | | | | | | | | | | | | | |
| Surname: |  | | | | | | | | First Initial: | | | |  | | |
| Address: |  | | | | | | | | | | | | | | |
| Postcode: |  | | | | | | | | | | | | | | |
| Home Tel. No.: |  | | | | | | | | Mobile Tel. No.: | | | |  | | |
| Email Address: |  | | | | | | | | | | | | | | |
| Do you have the right to work in the UK? | | | | | Yes | | q | | No | q | | | | | |
| ***If you are applying for a Housing Support Post:*** | | | | | | | | | | | | | | | |
| Are you a member of the PVG scheme? | | | | | Yes | | | | q | No | | q | | | |
| If yes, for which type(s) of regulated work? | | | | | | Adults | | | q | Children | | q | | | |
|  | | | | | |  | | |  |  | |  | | | |
| **CURRENT / MOST RECENT EMPLOYMENT** | | | | | | | | | | | | | | | |
| Job Title: | | |  | | | | | | | | | | | | |
| Name & Address of Employer: | | |  | | | | | | | | | | | | |
| Nature of Business: | | |  | | | | | | | | | | | | |
| Start Date: | | |  | | | | | End Date (If Applicable): | | | | | |  | |
| Reason for Leaving: | | |  | | | | | | | | | | | | |
| Salary & Benefits: | | |  | | | | | | | | | | | | |
| Main Duties & Responsibilities *(continue on a separate sheet if necessary)*: | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| *You can supplement your application by providing a CV that demonstrates your other previous employment and experiences.* | | | | | | | | | | | | | | | |
| **EDUCATION & TRAINING** *(continue on a separate sheet if necessary)* | | | | | | | | | | | | | | | |
| **QUALIFICATIONS (SCHOOL, COLLEGE, UNIVERSITY)** | | | | | | | | | | | | | | | |
| **Educational Establishment** | | | | **Qualifications Obtained** | | | | | | | | | **Grade / Level** | | | |
|  | | | |  | | | | | | | | |  | | | |
| **PROFESSIONAL MEMBERSHIPS / QUALIFICATIONS / REGISTRATIONS** | | | | | | | | | | | | | | | |
| **Professional Body** | | | | **Status** | | | | | | | | | **Membership No.** | | | |
|  | | | |  | | | | | | | | |  | | | |
| **OTHER RELEVANT TRAINING / CERTIFICATES** | | | | | | | | | | | | | | | |
| **Course Attended** | | | | | | | | | | | | | **Qualification / Certificate** | | |
|  | | | | | | | | | | | | |  | | |
|  | | | | | | | | | | | | | | | |
| **REFERENCES** | | | | | | | | | | | | | | |
| Please give details of 2 people who are willing to provide you with a reference. One referee should be your current or most recent employer. Referees should not be related to you.  We prefer to e-mail referees – so, please provide e-mail addresses for your referees, if possible. | | | | | | | | | | | | | | |
|  | | **REFEREE 1** | | | | | | | | | **REFEREE 2** | | | |
| Name: | |  | | | | | | | | |  | | | |
| Position: | |  | | | | | | | | |  | | | |
| Company Name & Address: | |  | | | | | | | | |  | | | |
| Postcode: | |  | | | | | | | | |  | | | |
| Tel. No.: | |  | | | | | | | | |  | | | |
| Email Address: | |  | | | | | | | | |  | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| **SUPPORTING STATEMENT / ADDITIONAL INFORMATION** | | | | | | |
| Please say why you would like this job and why you believe that you are suitable for it, identifying how your past experiences in work and/or education help you meet the essential and desirable requirements for the post. You may also wish to include information about your interests, any voluntary work you have undertaken, or anything else that might support your application.  Please also indicate which scheme you are applying to work at. | | | | | | |
|  | | | | | | |
| **INTERVIEW ARRANGEMENTS** | | | | | | |
| Please let us know if we need to make any particular arrangements for you if you are invited to attend interview e.g. if you have any mobility problems, please let us know so that we can hold interviews in a more accessible room: | | | | | | |
|  | | | | | | |
| **CONNECTIONS TO CASTLEHILL** | | | | | | |
| Are you, as far as you are aware, related to, or do you have any connection with:   * Any current employee of Castlehill Housing Association, or anyone who has been employed by us in the last 12 months; or * Anyone who is currently a member of our Management Committee, or who has been a Committee member in the last 12 months? | | | | | | |
| Yes | q | | No | q | | |
| If yes, please provide details: | | | | | | |
|  | | | | | | |
|  | | | | | | |
| **DATA PROTECTION STATEMENT** | | | | | | |
| Castlehill Housing Association process the data contained on this form for recruitment purposes to allow us to conduct a fair and open selection process to appoint a suitably qualified and experienced person to an open vacancy. This form will be retained securely and access to it will be restricted to designated persons within HR, or those who need to see it as part of the recruitment and selection process. In the event you are not appointed to the post you have applied for, the information will be retained for a period of six months and then it will be destroyed. If you are appointed to the post, the form will be retained on your personal file.  A link to our Employee Fair Processing Notice is available on our online job page, or will have been sent to you in your candidate application pack. In this policy, you will find further information about our compliance with data protection legislation and your individual rights under this legislation. | | | | | | |
|  | | | | | | |
| **CANDIDATE DECLARATION** | | | | | | |
| I understand that appointment to this post is conditional on the information supplied with my application being correct and that, if I have withheld any information, or if any information is found to be false, I will be liable to disciplinary action, which may lead to my dismissal.  I hereby consent to the processing of the above data in accordance with the above Data Protection Statement and current Legislation. | | | | | | |
| Signature: | |  | | | Date: |  |
|  | | | | | | |
|  | | | | |  | |

**EQUAL OPPORTUNITIES MONITORING FORM *Confidential***

Castlehill Housing Association is committed to recruiting a workforce that reflects our commitment to equality. Completion of this form is voluntary – however, it is vital that we monitor and analyse diversity information so that we can ensure that out HR processes are fair, transparent and promote equality of opportunity for all staff and do not have an adverse impact on any particular group. Any information provided in this form will be treated as strictly confidential, the information provided will be collated anonymously and will be used for statistical purposes only. This information is not part of the selection process and will be separated from the application prior to short-listing.

*Please mark the appropriate boxes*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SEX:** | What is your sex? | | | | | |
|  | Male |  | Female | | |  |
|  | Intersex |  | Prefer not to say | | |  |
|  |  |  |  | | |  |
| **GENDER RE-ASSIGNMENT:** | Do you consider yourself to be a trans person? | | | | | |
|  | Yes |  | No | | |  |
|  | Prefer not to say |  |  | | |  |
|  |  |  |  | | |  |
| **AGE:** | Under 21 |  | 51-60 | | |  |
|  | 21-30 |  | 61-65 | | |  |
|  | 31-40 |  | Over 65 | | |  |
|  | 41-50 |  |  | | |  |
|  |  |  |  | | |  |
| **MARRIAGE:** | Are you currently married? | | Yes |  | No |  |
|  | Are you currently in a civil partnership? | | Yes |  | No |  |
|  | Prefer not to say | | |  |  |  |
|  | | | | | | |
| **DISABILITY:** | Are you a disabled person? | | | | | |
|  | Yes |  | No | | |  |
| If yes, please tell us which category you would use from the following list: | | | | | | |
|  | Autoimmune  Example: Multiple Sclerosis, HIV, Crohn’s/ulcerative colitis |  | Learning Difficulties Example: Down’s Syndrome | | |  |
|  | Mental Health Issues Example: Depression, bi-polar |  | Neurodivergent Condition  Example: Autism spectrum, dyslexia, dyspraxia | | |  |
|  | Physical Impairments  Example: Wheelchair user, cerebral palsy |  | Sensory Impairment- hearing impairment | | |  |
|  | Sensory Impairment- visual impairment | ☐ | Other | | |  |
|  | | | | | | |
| **RELIGION:** | Please tell us what best describes your religion or belief from the list below? | | | | | |
|  | Buddhism |  | Christianity - Catholic | | |  |
|  | Christianity - Protestant |  | Christianity - Other | | |  |
|  | Hinduism |  | Islam | | |  |
|  | Judaism |  | Sikhism | | |  |
|  | Other religion |  | No specific religious belief | | |  |
|  | Other belief (eg Humanism) |  | Prefer not to say | | |  |
|  |  |  |  | | |  |
| **SEXUAL ORIENTATION:** | What is your sexual orientation? | | | | | |
|  | Bisexual |  | Gay man | | |  |
|  | Heterosexual/Straight |  | Lesbian | | |  |
|  | Other |  | Prefer not to say | | |  |
| **ETHNICITY:** | Please insert an X in the box that best describes your ethnic group | | | | | |
|  | **African** | | | | | |
|  | African, African Scottish or African British |  | Other African Background | | |  |
|  | **Asian** | | | | | |
|  | Bangladeshi, Bangladeshi Scottish or Bangladeshi British |  | Indian, Indian Scottish, India British | | |  |
|  | Pakistani, Pakistani Scottish or Pakistani British |  | Chinese, Chinese Scottish or Chinese British | | |  |
|  | Other Asian Background |  |  | | |  |
|  | **Black or Caribbean** | | | | | |
|  | Caribbean, Caribbean Scottish or Caribbean British |  | Black, Black Scottish, Black British | | |  |
|  | Other Caribbean or Black Background |  |  | | |  |
|  | **Mixed Groups** | | | | | |
|  | Mixed or multiple ethnic group |  |  | | |  |
|  | **White** | | | | | |
|  | English |  | Gypsy Traveller | | |  |
|  | Irish |  | Polish | | |  |
|  | Roma |  | Scottish | | |  |
|  | Welsh |  | Other British | | |  |
|  | **Other** | | | | | |
|  | Other group |  | Prefer not to say | | |  |

*Thank you for completing this form.*