

**Application for Employment**

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| **Post applied for, including job reference:** |  |
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| **How did you find out about this opportunity?**  *(e.g. our website, Indeed, Facebook, one of our colleagues etc.)* |  |

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| **PERSONAL DETAILS** | | | | | |
| Title |  | Forename |  | Surname |  |
| Full Home Address | |  | | | |
| Home Telephone No. | |  | | | |
| Mobile Telephone No. | |  | | | |
| Email Address | |  | | | |

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| **CURRENT OR MOST RECENT EMPLOYMENT** | | | |
| Employer’s Name |  | | |
| Employer’s Address |  | | |
| Position Held |  | | |
| Date Started |  | Date Left (if applicable) |  |
| Salary / Wage |  | Period of Notice Required |  |

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| *In the box below, please write a brief description of what duties/responsibilities you had in your current or most recent employment:* |
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| **OTHER WORK EXPERIENCE (paid or unpaid)** – list most recent first and add more rows if needed | | | | | |
| From | To | Name & Address of employer | Position Held | Salary/ Wage | Reason for leaving |
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| **EDUCATION, QUALIFICATIONS & VOCATIONAL TRAINING** – list most recent first and add more rows if needed | | | |
| From | To | Establishment (School / College / University) | Exam, Qualification, Grades |
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| **PROFESSIONAL MEMBERSHIP / ACCREDITATION / REGISTRATION** *– If applicable* | | | |
| Name of Body |  | Renewal Date |  | |
| Registration No. |  | Nurse PIN |  | |
| Level of accreditation |  | | | |

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| Have you been removed from the register or have conditions been made on your registration by a fitness to practise committee of a licensing or regulatory body in the UK or in any other country? If you choose not to give details you will be asked about this if shortlisted. | |
| YES  NO | *If yes, please provide further details here:* |

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| **DISCIPLINARY ACTION** | |
| Do you have any serious disciplinary action (pending or otherwise) against you? If “YES”, and you choose not to give details below, you will be asked about this if you are shortlisted. | |
| YES  NO | *If yes, please provide details here:* |

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| **COMPLAINTS/INVESTIGATIONS *(FOR CLINICAL ROLES)*** | |
| Have you been the subject of a complaint or a fitness to practise investigation or proceedings by a licensing or regulatory body in the UK or any other country? If you choose not to give details you will be asked about this if short-listed. | |
| YES  NO | *If yes, please provide details here:* |

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| **SUPPORTING STATEMENT** |
| Please use the following section to explain why you are interested in the post, how your experience, skills and abilities are relevant and please detail how you meet the requirements of the job using the criteria in the person specification. The information you provide will largely determine whether or not you are selected for interview, therefore please take time to consider your answer. Continue on separate sheets if necessary. |
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| **CANVASSING** |
| If you are related to or know any member of Mental Health Concern, Insight IAPT or Insight Wellbeing at Work, please give details in the box below. *Canvassing panel members and/or managers for preferential treatment will disqualify applicants.* |
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| **ELIGIBILITY TO WORK IN THE UK - *please tick which of the following you have*:** |
| British Passport or UK birth certificate and letter  Certificate of registration/ naturalisation as a British Citizen  Passport showing right to live and work in the UK  EEC passport or identify card plus required work registration letter  Non-European passport with relevant work visa  Any other document that supports your eligibility to work in the UK |

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| **REFERENCES**  You must provide the name and contact details of two referees, i.e. people who can comment on your suitability for this post.*If possible, please give an email address as this is our preferred method of contact.*  Referee 1: If you are, or have been, employed in the last five years, then this must be your most recent employer, e.g. your most recent line manager or someone in a position of responsibility who can comment on your work experience, competence, personal qualities and suitability for the post. If you are a student, this will be a teacher at your school, college or university instead.  Referee 2: Your second reference should be a previous employer. However, if you do not have a previous employer, we will accept professional character references (e.g. academic, work colleagues, volunteering). *We are unable to accept references from personal friends/family.* | | | | |
| **REFEREE 1** | |  | **REFEREE 2** | |
| Name: |  |  | Name: |  |
| Position/Job Title: |  |  | Position/Job Title: |  |
| Relationship to you: |  |  | Relationship to you: |  |
| Name of organisation they work at:  *(if employer/academic)* |  |  | Name of organisation they work at:  *(if employer/academic)* |  |
| Telephone Number: |  |  | Telephone Number: |  |
| Email Address (please supply): |  |  | Email Address (please supply): |  |

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| **REHABILITATION OF OFFENDERS ACT 1974 (EXEMPTIONS) ORDER 1975 AS AMENDED** | |
| All posts within our organisation are exempt from certain provisions of the Rehabilitation of Offenders Act 1974. The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered ‘protected’. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them in to account.  We are also entitled, under arrangements introduced for the protection of vulnerable people, to check with the Disclosure and Barring Service (formerly the CRB) for the existence and content of any criminal record of the successful applicant.  The disclosure of a criminal record, or other information, will not debar you from the appointment unless the selection panel considers that the conviction renders you unsuitable for appointment. In making this decision we will consider the nature of the offence, how long ago and what age you were when it was committed and any other factors which may be relevant, including appropriate considerations in relation to our Equal Opportunities Policy. Failure to declare a conviction or caution may, however, disqualify you from appointment, or result in summary dismissal if the discrepancy comes to light. | |
| Do you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974? | *If yes, please provide details:* |
| Do you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendments) (England and Wales) Order 2020? | *If yes, please provide details:* |

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| **DECLARATION - Please sign this after you have completed all parts of the application form** | |
| I declare that the information I have given on this form is, to the best of my knowledge, true and complete. I understand that any offer of appointment and subsequent employment is conditional and if my application is incomplete, untrue or inaccurate, then you shall be entitled to withdraw any offer of appointment or terminate any contract of employment.  I understand that any offer of appointment and subsequent employment is subject to satisfactory references, evidence of my right to work in the UK and if applicable, a satisfactory disclosure from the DBS. This equally applies to any medical questionnaire/forms which I may be asked to complete.  In line with GDPR; I hereby give my consent to you to record and process the information supplied on this application form for the purpose of recruitment and selection. Please note the organisation have the right to reject an application without giving a reason.  I understand that if I am not offered employment, my application and associated documentation will be securely destroyed in twelve months’ time. | |
| **SIGNED:** | **DATE:** |

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| **RETURNING COMPLETED APPLICATION FORMS**  Please return completed application forms by the closing datevia email to: [recruitment@concerngroup.org](mailto:recruitment@concerngroup.org)  You can also return via post to: Recruitment Team, Buttress House, 36 Brenkley Way, Seaton Burn, NE13 6DS  Please also include the Inclusion & Diversity Form, if you are happy to complete it |