

HEADWAY SUFFOLK

APPLICATION FOR EMPLOYMENT

STRICTLY CONFIDENTIAL

This application form is an important part of our selection procedure. It has been designed to enable you to give us a meaningful written representation of yourself and your career interests. Please complete the form as accurately as possible in black ink, but if sections do not apply leave them blank. If word processing your application, we will accept applications that supply all the information requested on this form.

POSITION APPLIED FOR:	Office Use:	
	Candidate No:	

PERSONAL DETAILS:			
Name:			
Address:			
Town/City:			
County:		Post Code:	
Telephone Number (inc code)	Work:		
Home:	Mobile:		
E-mail:			
National Insurance No:			
Do you hold a current Driving Licence?	YES	NO	
What type of Licence is it?			

ACCESSIBILITY		
Are there any adjustments that may be required to be made should you be invited for interview? If YES please state below):	YES	NO

JOB TITLE:

CANDIDATE NO:

SUPPORTING STATEMENT

Please use this space to write a statement supporting your application. Give details of your interest in the post and show how your experience, skills and training – gained both in and outside paid work, and through study – relate to the detailed requirements of the Job Description and person specification.

If you do not show how you meet the requirements listed in the Person Specification, the Shortlisting Panel will not be able to establish whether you meet those requirements.

Please continue on another sheet if necessary

JOB TITLE:

CANDIDATE NO:

Please give details of your education history, including qualifications achieved.

Please give details of training and professional development undertaken, including courses attended and qualifications achieved (please include dates of most recent training).

Please give details of membership of professional institutes:

Please tell us about your hobbies:

Please continue on another sheet if necessary

JOB TITLE:	CANDIDATE NO:
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CONVICTIONS: The sort of work for which you are applying is excluded from the operation of Section 4 (2) of the Rehabilitation of Offenders Act 1974. You must therefore, provide details of any convictions you have. If you fail to provide any of these details, and you are employed, the omission may lead to your dismissal. Any information given here will be treated as strictly confidential. The information will be considered only in relation to posts which are excluded from the operation of the 1974 Act by the Rehabilitation of Offenders Act 1974 (Exemption) Order.

DO YOU HAVE ANY CONVICTIONS:	YES	NO
If yes, please give details:		

REFEREES – Do you wish to be approached before referees are contacted?		Yes	No
Please give two referees (one of which must be your present or last employer)			
Name:		Name:	
Address:		Address:	
Tel No:		Tel No:	
Relationship:		Relationship:	

DECLARATION:
To the best of my knowledge the information I have given is correct. I understand that giving false information or omitting to give relevant information, could disqualify my application or, if I am appointed, could lead to my instant dismissal.
SIGNATURE OF APPLICANT DATE:

Please return marked **PRIVATE AND CONFIDENTIAL** to Chief Executive, Ipswich and East Suffolk Headway, Epsilon House, West Road, Ransomes Europark, Ipswich IP3 9FJ

JOB TITLE:	CANDIDATE NO:
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Equal Opportunities Monitoring (STRICTLY CONFIDENTIAL)

This Organisation is committed to becoming an equal opportunities employer. All applicants for jobs are considered only on their ability to contribute to the aims of the charity, not on their national or ethnic origin, gender, marital status, sexual orientation, age, religion or disability.

To help ensure that the Organisation's Equal Opportunities Policy is effective, please answer the questions below. The information you provide will be used to monitor the overall profile of all the people who apply and will be treated in strictest confidence.

ETHNIC ORIGIN:			
White - British		Other*	
Mixed – White and Black Caribbean		White and Black African	
White and Asian		Other*	
Black or Black British		Caribbean	
African		Other*	
Asian or Asian British		Indian	
Pakistani		Bangladeshi	
Chinese		Other*	

*If Other, please state

GENDER:			
Male		Female	

DATE OF BIRTH:	
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DISABILITY – Do you consider yourself to have a disability:	YES	NO
If yes, please give details.		

Where did you learn about this vacancy?