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**Job Application Form**

|  |  |
| --- | --- |
| Name of Post: |  |
| Closing Date: |  |

**Section 1 - Personal Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Surname and title: |  | | Forenames: |  |
| Contact Address: |  | | | |
| Postcode: |  | | | |
| Telephone number: | |  | | |
| Mobile number: | |  | | |
| E-mail address: | |  | | |

**Section 2 - Declaration**

|  |  |  |  |
| --- | --- | --- | --- |
| **Please note: If any answers to questions on this application form are found to be false within the knowledge of the candidate, or if there is any wilful omission, the candidate, if appointed, will be liable to be dismissed.** | | | |
| I hereby declare that, to the best of my knowledge, the information given on this form is correct and I confirm that I am entitled to live and work in the United Kingdom. | | | |
| Signature: |  | Date: |  |

**Section 3 – Education**

|  |  |  |
| --- | --- | --- |
| Please give details of any qualifications you and / or training relevant to this post that you have received: | | |
| Training body and address | Qualification / training | Date  (from – to) |
|  |  |  |

**Section 3a – Employment History**

|  |  |  |  |
| --- | --- | --- | --- |
| Please give details of your employment history, including any relevant voluntary work: | | | |
| Position | Employer Name and Address | Brief Summary of Responsibilities | Date:  from – to |
|  |  |  |  |

**Section 4 – Suitability statement**

**Please state below why you feel you have the relevant knowledge, experience and competencies for the post, using examples from paid or voluntary work, life experiences and / or training. *Please make sure to address each element of the Person Specification and give examples where you can****. Please also explain why you would like to work for Healthwatch Rochdale and your current understanding of the current health and social care arena within Rochdale and the wider Greater Manchester Footprint.* ***Part of the assessment criteria is to score each point on the Person Specification.***

|  |  |
| --- | --- |
|  | **Person Specification** |
|  | |

|  |
| --- |
|  |

**Section 5 : About you**

**Please tell us about yourself including any hobbies or interests.**

|  |  |
| --- | --- |
|  | **About you** |
|  | |

**Section 6 – Criminal Convictions and Cautions**

|  |  |
| --- | --- |
| Rehabilitation of Offenders Act 1974 - Do you have any spent or unspent convictions or cautions?\* | Yes 🗌 No 🗌 |
| *If you answered yes to the above question, please provide details here:* | |
| *Please note: The post you have applied for involves contact with children and other vulnerable members of society, and as such meets the exemption requirements under this Act. The successful applicant/s will be subject to an Enhanced Disclosure and Barring Service (criminal records) check before the appointment is confirmed. This will include all spent and unspent convictions, cautions, reprimands or final warnings. Healthwatch Rochdale is positive about rehabilitation and the disclosure of a criminal record will not disqualify you from appointment unless the selection panel considers that the conviction renders you unsuitable for appointment. In making this decision the panel will consider the nature of the offence, how long ago it took place, the age you were when it was committed and any other factors which may be relevant. Failure to declare a conviction, caution or bind over may disqualify you from appointment or result in summary dismissal should this information come to light in the future.* | |

**Section 7 – Eligibility to work in the UK**

|  |  |
| --- | --- |
| Do you require a work permit | Yes 🗌 No 🗌 |
| *Please give details i.e. If you already have a permit when does it expire? Are you in the process of applying? Etc. You will be required to produce documentation.* | |
|  | |

**Section 8 – Disability**

|  |  |
| --- | --- |
| Do you consider yourself to have a disability? | Yes 🗌 No 🗌 |
| *Please tell us if there are any ‘reasonable adjustments’ we can make to assist you in your application or with our recruitment process* | |
|  | |

**Section 9 – References**

|  |  |  |
| --- | --- | --- |
| Please supply details of two people who can provide a reference for you. Please provide references from your current and previous employer (paid / unpaid work). | | |
|  | First Referee | Second Referee |
| Name: |  |  |
| Job Title: |  |  |
| Address: |  |  |
| Phone: |  |  |
| E-mail address: |  |  |
| Relationship (i.e. manager): |  |  |
| *By signing the declaration, you give Healthwatch Rochdale Ltd consent for referees being contacted as indicated and for details of any sickness absence over the last 2 years to be obtained.* | | |

**Please return this form via email to:** [**info@healthwatchrochdale.org.uk**](mailto:info@healthwatchrochdale.org.uk)

**By 5pm on Friday 22nd January 2021**

Interviews will be held virtually on Tuesday 9th February.