

**APPLICATION FORM**

You are about to apply for a position at Shine ECCR. The information within your application will form the basis for selection and will be retained in all cases, in hard copy and/or electronically for a period of up to 12 months.

The information you provide is covered by the provision of the Data Protection Act 2018. In submitting your application, you are expressly consenting that we may handle and store the information given for recruitment and Equal Opportunity Monitoring purposes and form the basis of your employment record should you be a successful candidate. Please check all information you have provided is correct.

**Section 1: Personal Details**

|  |  |
| --- | --- |
| POSITION APPLIED FOR:  |  |
| REFERENCE NUMBER: |  |
| SURNAME: |  | FORENAME(S) |  |
| PREVIOUS NAME(S) (if applicable): |  | TITLE: |  |
| ADDRESS:POSTCODE: |  |
| HOME TELEPHONE: |  | EMAIL: |  | MOBILE: |  |
| WORK TELEPHONE: |  | EMAIL: |  | FAX: |  |

**Section 2: Present Position (if applicable)**

|  |  |  |  |
| --- | --- | --- | --- |
| PRESENT POST (TITLE): |  | DATE APPOINTED: |  |
| NAME OF PRESENT EMPLOYER: |  |
| ADDRESS OF EMPLOYERPOSTCODE: |  |
| BRIEF OUTLINE OF MAIN RESPONSIBILITIES: |  | POINT ON SCALE(if applicable) |  |
| CURRENT SALARY (p.a.) |  |

|  |
| --- |
| **Section 3: References** |

One of these should be your present employer. If you are invited for interviews, references will be sought at the same time unless indicated, by you, with your application. We reserve the right to check previous employment history, this can include verbal references.

|  |  |  |  |
| --- | --- | --- | --- |
| NAME: |  | NAME: |  |
| JOB TITLE / STATUS: |  | JOB TITLE / STATUS: |  |
| ADDRESS: |  | ADDRESS: |  |
| POSTCODE: |  | POSTCODE: |  |
| TELEPHONE NUMBER: |  | TELEPHONE NUMBER: |  |
| EMAIL ADDRESS: |  | EMAIL ADDRESS: |  |
|  | **YES** |  | **NO** |  | **YES** |  | **NO** |
| PERMISSION TO CONTACT PRIOR TO INTERVIEW (tick as appropriate) |  |  |  | PERMISSION TO CONTACT PRIOR TO INTERVIEW (tick as appropriate) |  |  |  |

**Section 5: Previous Employment**

Please enter earliest first. Please attach a separate sheet if necessary. This may include voluntary work.

|  |  |
| --- | --- |
|  | DATES |
| NAME & ADDRESS OF EMPLOYER | POST TITLE & SCALE | REASON FOR LEAVING or CONSIDERING LEAVING  | FROM | TO |
|  |  |  | DD/MM/YYYY | DD/MM/YYYY |

|  |
| --- |
| **EXPLAIN ANY BREAKS IN SERVICE:** |

**Section 6: Relevant Professional Development**

|  |  |
| --- | --- |
|  | DATES |
| TITLE | ORGANISING BODY | DURATION  | FROM | TO |
|  |  |  | DD/MM/YYYY | DD/MM/YYYY |

**Section 7: Candidate’s Supporting Information**

Explain how you will ensure the SHINE ECCR ethos/values will be met in the position that you are applying for. No more than 1 paragraph on each value.

1. Care and Compassion
2. Honesty
3. Aspiration
4. Integrity
5. Respect

Please indicate the skills and qualities you will bring to the post that will help to ensure the success of Shine ECCR.

**Section 8: Access**

|  |  |  |  |
| --- | --- | --- | --- |
|  | YES |  | NO |
| Do you have any requirements e.g. equipment, special access arrangements or facilities in order to attend and complete the interview process? |  |  |  |
|  |  |  |  |
|  |  |  |  |

If yes, please provide details:

**Section 9: Entitlement to Work in the UK**

Please indicate your entitlement to work in the UK from the list below:

|  |  |  |  |
| --- | --- | --- | --- |
|  | YES |  | NO |
| British Citizen |  |  |  |
|  |  |  |  |
| Overseas National **with** permission to work in the UK |  |  |  |
|  |  |  |  |
| Overseas National currently **without** permission to work in the UK |  |  |  |

If you are an Overseas National with permission to work in the UK, please confirm the type of permission you have:

**SECTION 10: Applicants Statement**

|  |  |  |  |
| --- | --- | --- | --- |
|  | YES |  | NO |
| I am related to a senior member of staff or governor at Shine ECCR |  |  |  |
|  |  |  |  |
| I am prepared to undergo a medical examination, if required |  |  |  |
|  |  |  |  |
| I can produce the original documents of my qualifications |  |  |  |
|  |  |  |  |
| If appointed I do not have any business or financial interests that might conflict with |  |  |  |
| the duties of the post |  |  |  |
|  |  |  |  |
| I understand that a false entry may lead to either an offer of employment being withdrawn |  |  |  |
| OR disciplinary action being taken which could result in dismissal |  |  |  |
| I understand that canvassing, directly or indirectly, will be a disqualification |  |  |  |
|  |  |  |  |
| **Rehabilitation of Offenders Act, 1974 (Exceptions Order, 1975)****& the Protection of Freedoms Act 2012**Please note that applicants for posts at Shine ECCR are not entitled to withhold information about past convictions, ‘spent’ or otherwise, under the terms of the above Act(s) because Shine ECCR is a “regulated activity” in a “specified place” (i.e. a school). A “regulated activity” is work that at “barred person” **must not** do. If you have been barred from working with children and/or vulnerable adults, you will not be able to work for Shine ECCR.**You must disclose ALL past convictions and cautions at the time of your application**. Having a criminal record will not necessarily disqualify you from working for Shine ECCR. This will depend on the nature of the position you are applying for and the circumstances and background of the offence(s). In the event of employment being offered and taken up, any failure to disclose such convictions is likely to result in disciplinary action by Shine ECCR that may lead to dismissal. Any information may be given on a separate sheet from your application form and will be kept completely confidential. Successful candidates will be required to complete a Disqualification by Association Declaration prior to commencing employment. In addition, Shine ECCR will require the successful candidate to agree to a ‘Disclosure and Barring Service – Enhanced Check for a Regulated Activity’ (with children’s and/or adults’ barred list checks) for convictions that may or may not be relevant to the appointment. If you are the successful candidate, you will be required to complete the DBS Application Form after the conditional offer of employment has been made and attend a mandatory safeguarding induction. **Declaration:** I have read and understood the above statement. If I have any convictions or cautions to declare I will supply written details of them, in a separate envelope marked ‘private and confidential’ with this application.Signed………………………………… Date……………………………….. |
|  |  |  |  |
| **I confirm that the statements in this application are true to the best of my knowledge** |
| **SIGNED:** |  | **DATE:** |  |

[If this form is submitted electronically then it will be printed for the applicant to sign prior to appointment]

Once you have completed this form, please email as an attachment together with the Equal Opportunities Monitoring Form to neil@shine-eccr.com.

**Please note: Shine ECCR are committed to safeguarding and protecting the welfare of children and vulnerable adults as its number one priority. This commitment to robust recruitment, selection and induction procedures extends to organisations and services linked to Shine ECCR on its behalf.**