

# APPLICATION FORM



<b>FOR OFFICIAL USE</b> Candidate No:	Date Received:
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## CONFIDENTIAL

Please use black ink and write clearly or type

### PERSONAL DETAILS

Post Applied For	Ref No
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Location
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Surname or Family Name
Former Name(s)

Other names
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Home Address
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Home Telephone
Mobile

Daytime Telephone
E-mail address

Are you between 16 - 65 year of age? Yes  No  (Click in box and type 'X' as appropriate)

### PRESENT OR MOST RECENT POST

Post Held	Department	Date appointed	Current Salary:
Name and Address of Employer		Availability (Days & Times) :	
.....Postcode			
Telephone Number		Is your present Job? Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Other <input type="checkbox"/>	
National Insurance No.		Can we contact you at work? Yes <input type="checkbox"/> No <input type="checkbox"/>	

### APPLICATION DETAILS

**IT IS ESSENTIAL THAT YOU COMPLY WITH THIS SECTION OF THE FORM**

Please use additional A4 sheets to give details of your relevant experience/training/skills together with any other information in support of your application, including details of your present post. Ensure that you itemise your responses so that you can demonstrate how your knowledge/skills/experience to date qualifies you. If you omit information which we have asked for we may not be able to consider your application. Please indicate how many additional sheets, if any, you have enclosed.

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**DETAILS OF ALL PREVIOUS EMPLOYMENT** – Most recent first. Enter details of ***all*** your work experience including periods of non-employment, unpaid voluntary work and study.

Name and Full Address or Employer	Date of Employment		Position held and main duties –
	From	To	

Interests/Hobbies:

Strengths (e.g. Good at math, excellent motivator):

Weaknesses (e.g. Spelling, filling forms, have to travel at short notice):

**COURSES, QUALIFICATIONS AND OTHER TRAINING UNDERTAKEN WHICH IS RELEVANT TO THIS APPLICATION**

Course/Training	Date	Organising Body

**DETAILS OF PEOPLE WHO MAY BE CONTACTED FOR REFERENCES –**

If you have not been employed before, give details of teachers/lecturers or others who know you well enough to comment on your ability. Friends and relatives must not be used.

First referee (someone who can comment on your character, e.g. pastor, doctor, colleague, teacher)	
Address          Postcode	Telephone
	E-mail
	Fax

Second referee (someone who can comment on your character, e.g. pastor, doctor, colleague, teacher)	
Address          Postcode	Telephone
	E-mail
	Fax
Capacity in which known to you	Daytime Tel No.

May we contact your referee for a reference straight away if listed as a referee? Yes  No

If NO when may we do so?

**CONVICTIONS**

Do you have any criminal convictions? Yes  No

Please give details (on a separate sheet) of any criminal convictions that you may have which are not excluded by the Rehabilitation of Offenders Act 1974 (date, conviction, sentence etc.) The disclosure of a criminal record may not necessarily prevent you from being appointed. The nature of the offence, how long ago it took place, your age at the time and any other relevant factors may be considered when a decision is made. Please note that some convictions are never considered 'spent' under the terms of the Act.

**TO BE COMPLETED ONLY BY APPLICANTS TO POSTS WHICH HAVE ACCESS TO CHILDREN AND VULNERABLE ADULTS AND BY THOSE WHO MANAGE SUCH POSTS**

Date of Birth (dd/mm/yyyy):

Details of educational history – most recent first. Please list all schools, colleges, universities etc, which you have attended.	Course Studies	Qualifications level (if obtained)	Dates	
			From	To

Please attach additional sheets if necessary. You may be asked to provide original proof of relevant Qualifications if you are interviewed.

**Activities involving contact with children and vulnerable adults outside the work environment (e.g. sports coach, scout leader etc).** Please attach additional sheets if necessary

I agree, if I am selected for this appointment, to checks being made with the Criminal Records Bureau for any record of convictions or cautions against me. I am aware that such information as appropriate for Standard/Enhanced Disclosures will be made available.

**I CONFIRM THAT THE INFORMATION GIVEN ABOVE IS CORRECT.**

I also consent to Croydon Supplementary Education Project carrying out other appropriate checks with the Criminal Records Bureau if it so wishes.

**Name (please print)**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

## Residency

Are you required to have a UK work permit? Yes  No

**Do you have a personal/family relationship with anyone likely to be involved in the selection process for this post?**

Yes  No

If Yes, please give name(s) of relevant person(s) and the relationship(s).

**I understand that seeking to unfairly influence any employee of Croydon Supplementary Education Project will make my application unacceptable.**

### **Data Protection Act 1998:**

The personal information submitted by you on this application form and in any accompanying documents will be used by Croydon Supplementary Education Project and any other person it appoints to assist, for the purpose of appointing to the position applied for and to monitor the effectiveness, efficiency and fairness of the selection process. The information may also be used in internal proceedings to consider a complaint about the selection process and/or to defend Croydon Supplementary Education Project against a legal challenge to the fairness of the selection process from any interested party. For these reasons, the information you submit will be kept on the organisation's personnel records for 6 months if you are not short-listed and 2 years if you are. The information supplied by you will also be subject to verification and we may need to contact people and/or organisations to confirm some of the facts contained in your application, e.g. referees, previous employers, educational establishments, examination bodies, etc.

I have read the above statement and consent to the personal data submitted with this Mentor application being used for the purposes described. Croydon Supplementary Education Project is under a duty to protect the public funds being administered and may use the information you have provided on this form within Croydon Supplementary Education Project for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.

**Please sign the statement below indicating your consent to the information being held, used and verified as described above.**

**If you decline to give your consent as requested above Croydon Supplementary Education Project will be unable to consider your application.**

I declare that to the best of my knowledge all parts of this form, attachments and additional sheets provided by me have been completed fully and are accurate. If I am appointed to the post I understand that any major omission or inaccurate information relevant to my application could lead to the withdrawal of an offer.

**SIGNATURE**

**Date:**

Please return the completed form to:

Croydon Supplementary Education Project  
23 – 34 Sydenham Road  
Croydon  
Surrey  
CRO 2EF

**TO BE COMPLETED BY APPLICANTS WHO WILL HAVE  
ACCESS TO CHILDREN AND OTHER VULNERABLE  
PEOPLE AND BY THOSE WHO  
WILL MANAGE SUCH POSTS  
CHECK ON CONVICTIONS OR CAUTIONS**

A check as to the existence and content of a criminal record may be requested from the Criminal Records Bureau after a person has been selected for appointment to this post. Refusal to agree to a check being made could disqualify you from being considered for the appointment.

You are therefore asked to sign the statement below to confirm your agreement, if you are selected for the appointment, to a check being made on any criminal record applicable to you.

**Please give details of ALL convictions, cautions, reprimands or warnings (whether spent or not).**

**CRIMINAL RECORDS BUREAU**

The Criminal Records Bureau, an executive agency of the Home Office, helps employers check records which were previously held by the police, the Department of Health and the Department for Education and Employment.

Different levels of disclosure can be provided, according to the type of work applied for.

The position for which you have applied may necessitate a:

Standard disclosure

Enhanced disclosure

**STANDARD DISCLOSURE**

These are for positions that involve regular contact with children or vulnerable adults. They contain details of all convictions, cautions, reprimands or warnings on record.

**ENHANCED DISCLOSURE**

These are for positions with greater contact with children or vulnerable adults, like social workers and doctors, for example. They involve an extra level of checking.

**PREVIOUS CHECKS**

If a check has been previously carried out for you, please provide the name of the local authority who undertook it, the outcome and the date it was carried out.

It is not sufficient to give the name of an employment agency (if applicable). If you have a letter giving the result, please attach a copy.

Local Authority

Date

Outcome

Have you ever been subject to any sort of investigation by an employer?

Yes

No

If you have answered "yes" to this question, please give details on a separate sheet.

# EQUAL OPPORTUNITIES MONITORING FORM

Post Applied For

Ref No:

Surname or Family Name

Other names

Former Name(s)

(Click in the appropriate box before typing – small boxes only need 'X')

**Do you consider yourself to have a disability** (ie a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities)?

Yes  No

**To which one of the following age groups do you belong?**

Under 20  20-29  30-39   
40-49  50-59  60 and over

**If you have a disability what equipment, adaptations or adjustments to working conditions would assist you in carrying out your duties?**

**What is your religion?**

This question is optional.

These categories are based on the 2001 census. *Please tick one box only*

None  1 Christian  2  
Buddhist  3 Hindu  4  
Muslim  5 Sikh  6  
Jewish  7  
Other  90

If "other" please specify:

**What is your gender?**

Male  Female

**Which of the following best describes your Ethnic origin?** These categories are based on the 2001 census. *Please tick one box only.*

(a) **White:** British  20 Irish  21 Other  22

(b) **Mixed:**

White & Black Caribbean  30

White & Black African  31

White & Asian  32

Other Mixed Group  33

(c) **Asian or Asian British:**

Indian  40 Pakistani  41

Bangladeshi  42 Other Asian  43

(d) **Black or Black British:**

Caribbean  50 African  51

Other Black background  52

(e) **Chinese or other ethnic group:**

Chinese  60 Any other ethnic group  70

If "other" please specify:-

**What is your Sexuality?**

This question is optional.

*Please tick one box only.*

Heterosexual  Gay Man or Lesbian   
Bisexual  Prefer not to say

**How did you hear about CSEP's Mentoring Programme?**

**This form will be separated from the main application form and will not be provided to the short-listing panel. Your answers will be treated in the strictest confidence and the information you provide will only be used for monitoring purposes. How you complete this form has no connection to the evaluation of your application in any way.**

**FOR OFFICIAL USE ONLY:**

<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Candidate No:</b>	<input type="text"/>	

# EQUAL OPPORTUNITIES STATEMENT

At Croydon Supplementary Education Project we value the individual contribution of all our employees, children and parents irrespective of gender, age, marital status, disability, sexual orientation, race, colour, religion, ethnic or national origin.

We will treat our staff, children and parents with dignity, respect and consideration. We will work to provide an environment in which promotes equality of opportunity and is free from discrimination, victimisation or harassment, where children receive the best care, have access to appropriate learning opportunities and staff feel valued. This commitment is reflected in our policies and practices and is integral to our working relationships and the provision of our service.

Staff will try to display positive images for children to associate themselves with. We will try to make available multi-cultural activities and equipment to enhance and encourage Equal Opportunities for all.

Any act, which contravenes the above, is considered a serious disciplinary offence.

All festivals are acknowledged to the best of our ability and awareness. Christmas is celebrated within the Project. Notification must be given in advance by a parent who wishes to withdraw their child from taking part in the Christmas festivities. Birthdays are celebrated, notification must be given by the parent should they wish their child's birthday not to be acknowledged.

The overall aim of the Project is to provide friendly and professional care, learning, play and work opportunities for all.

Within this context, this Equal Opportunities Policy aims to help us:

- Demonstrate our commitment to Equal Opportunities
- Make full use of the talent of our children, staff and parents
- Allow equal access to opportunities and services offered to parents and children
- Strengthen our reputation as a caring childcare provider and caring employer
- Ensure our childcare policies and procedures promote good practice
- Attract and retain staff of the highest calibre, recruited fairly and on ability to do the job
- Listen to the voice of the children and parents and decide how services may need to be improved
- Recognise and value the diversity of the community we serve and understand that childcare needs may vary between communities
- Monitor the implementation of this policy

# GUIDANCE NOTES FOR APPLICANTS

**Thank you for your enquiry**

**The information you provide on this application form and additional sheets will determine whether you are short listed for interview.**

If you do not understand anything on the form, need help in completing it or need the form in an alternative format (large print, on disc, tape etc.) please ring the Croydon Supplementary Education Project on Tel: 0208 686 7865.

Please let us know if someone else completes the form for you.

## **EXPERIENCE**

We are interested in all employment you have undertaken. If you have not had a full time or permanent job, please give details of any other employment you may have had (work experience, part time, voluntary or holiday work).

## **DATA PROTECTION**

The information you have supplied on this application form may be processed by computer, or may form the basis of manual records. This data will be used to produce anonymous statistics in connection with Equal Opportunities and recruitment monitoring.

## **DISABILITY**

Croydon Supplementary Education Project welcomes applications from people with disabilities.

Please let us know if you need additional assistance from us in order to complete the application form or prior to attending the selection process (special parking, ground floor venue, sign language interpreter, large print, wheelchair access, etc.)

**EQUALITIES COMMITMENT** Croydon Supplementary Education Project has an equal opportunities policy which recognises the Borough is a diverse community within which each person is valued regardless of race, gender, disability, sexuality, religion or age.