

Ann Turner & Cathy Price Ely St Johns Community Room St John's Road Ely, Cambs. CB6 3BW

Tel: 07814788001 Email: cathy@kidsclubely.co.uk

Job Application Form

CONFIDENTIAL

Please complete this form in type or black ink. All questions must be answered in the boxes provided.		
Post: Closing Date:		
First name(s): Surname:		
Address:		
	Post Code:	
Mobile Telephone Number:	Work:	
	·	
Please give the names and addresses of two people who ca should be your present or most recent employer. The referee not the case please give details of relationship.		
Name: Name:	ame:	
Position: Po	osition:	
Address: Ad	ddress:	
Tel: Te	el:	
Verification is normally sought after interview. Please indicate whether your references can be approached before the interview. YES/NO		
Do you need a work permit to work in the UK? YES/NO National	al Insurance Number:	
Do you have a driving licence? YES/NO Do you have	access to a vehicle? YES/NO	
Do you have reasonable access to public transport? YES/NO		

Qualifications Achieved:				
Secondary Schools, Colleges, Universities	From:	То:	Brief Details of Courses:	Grade:
Study currently being undertaken:				
Secondary Schools Colleges, Universities	From:	То:	Brief Details of Courses:	Grade:
Professional or other qualifications, appl	renticeships, m	nemberships c	f professional organisations:	
Other training you have received whi	ch you consid	der relevant:		
DISABILITY OR HEALTH PROBLEMS FROM DISABLED PERSONS ARE WE		CLUDE FULL	. CONSIDERATION FOR THE JO	B AND APPLICATIONS
Health				
Please give number of sick days in last	12 months			
Please give number of separate occurre	ences of illness	in last 12 mo	nths	

	ant rooms a	mnlover.		
urrent/m	iosi receni e	mployer:		
ddress:				
				t Code:
				ce required:
b Title:			Basic	salary per annum:
rief Desc	cription of Du	uties:		
eason fo	or leaving:			
			employment history, ac	counting for any gaps (please
ontinue o		e sheet of paper if necessary). Employer: Name and Address:	Post:	Reason for Leaving:
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ontinue o	To:	e sheet of paper if necessary). Employer: Name and Address:	Post:	Reason for Leaving:

Experience/Relevant Skills

Having read the job description and person specification, please state how your experience and achievements to date would make you a suitable candidate for this post. If you need to continue beyond these pages of the form please use the same size white paper.				

Declaration

Any of the above particulars may be subject to check. I understand that any false, inaccurate or incomplete information could result in dismissal, disciplinary action or a withdrawal of any offer of employment.

I declare that the information given on this form is to the best of my knowledge correct and complete and can be treated as part of any subsequent contact of employment.

I understand that Kids Club may process, by means of a computer database or otherwise, any information which I provide to it, for the purpose of employment with Kids Club.

Signature:	Date:

Please return in an A4 or C5 sized envelope marked 'CONFIDENTIAL'; to:

Kids Club Ely Name: Cathy Price

Address: Kids Club Ely

St John's Community Room

St John's Road

Ely

CB6 3BW

PLEASE ENSURE THE CORRECT POSTAGE IS PAID (A4 Envelope is large letter) AS APPLICATIONS SENT WITH INSUFFICIENT POSTAGE WILL NOT BE CONSIDERED.

EQUAL OPPORTUNITIES

We are committed to Equal Opportunities in Employment. As part of this policy, all applicants for employment are requested to complete this section for the purposes of monitoring the policy and it will be separated from your application. The information it contains will not be used in deciding whether or not to invite you to interview or offer you employment. As an Equal Opportunities Employer, we aim to ensure that no job applicant or employee receives less favourable treatment on the grounds of age, sex, race, colour, marital status, religion, ethnic origin, nationality or sexual orientation. Please help us to achieve our main aim by completing the following questions:

Position applied t	or:					
Name: surname ar	nd forename(s)	in full:				
Date of Birth:			Age:			
If you are invited to	attend for intervi	ew or to take up employn	nent, and require	special arra	angements, please give	details below:
Operators						
Gender:			_			
Male	Ш		Fe	male:		
Disability:						
Do you consider yo	ourself to have	a disability?	Yes		No	
Are you registered	disabled?		Yes		No 🗆	
I would describe I	my race or eth	nic origin as (please ti	ck appropriate l	oox):		
White British		White Irish			White Other	
Black African		Black British			Black Caribbean	
Black Other						
Bangladeshi		Chinese			Indian	
Pakistani		Other				
How did you find (please give the na		vacancy? spaper/journal/website)				
I consent to Kids C	lub holding the	data in the equal oppor	tunities section o	f this form		
Signature of appli	icant:				Date:	



SELF DISCLOSURE FORM (to accompany Application Forms)

This form should be completed by all applicants and returned in a sealed envelope with your application form, marked *Confidential: Self-Disclosure Form.* It will only be opened when an applicant has been shortlisted.

All information you provide will be treated as confidential and managed in accordance with relevant data protection legislation and guidance. You have a right of access to information held on you under the Data Protection Act 1998.

FULL NAME (in capitals):	Position applied for:
when applying for certain jobs and activitie	ffenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that es, certain convictions and cautions are considered 'protected'. This means aployers, and if they are disclosed, employers cannot take them into
Guidance about whether a conviction or ca	nution should be disclosed can be found on the Ministry of Justice website.
	re false information will disqualify any offer of employment, or result in summary eferral to the police. Confirmation of appointment is subject to a satisfactory
Do you have any unspent conditional cautions	or convictions under the Rehabilitation of Offenders Act 1974? YES/NO
	nditional) or spent convictions that are not protected as defined by the ons) Order 1975 (Amendment) (England and Wales) Order 2020? YES/NO
If YES, please give details of the conviction(s)	and date(s) in the space provided below (continue overleaf if necessary):
Are you currently subject to any criminal invehave a bearing on your suitability for this post. If YES , please provide more information (continuous)	
Have you ever been known to any Children's YES/NO. If YES, please provide more information	Services department or the police as being a risk or potential risk to children? ation (continue overleaf if necessary):
	on, disciplinary investigation and/or sanction by any organisation due to ren? YES/NO. If YES , please provide more information.
Signature of applicant:	Date: