

Post Applied for:

Macmillan Gateway Coordinator (PCN link)

Self Help UK Application Form

Closing Date:

Tuesday 8th October
5.00pm

Interview Date:

Monday 17th October

It is important that you read the guidance notes before completing this application form. Please complete this form fully using black ink or type. C.Vs are not accepted. Applications received after the closing date will not normally be considered.

THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.

Section 1 Personal details

Last Name:

First Name:

Address:

Postcode:

Home Telephone N^o:

National Insurance N^o:

| Letters | Numbers | Letter |
|----------------------|----------------------|----------------------|
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Daytime Telephone N^o:

Mobile Telephone N^o:

E-mail address:

Can we contact you at work? Yes No

Are you free to remain and take up employment in the UK with no current immigration restrictions? Yes No

Job Share Details
Are you applying on a job share basis? Yes No

Driving Licence – if relevant to post applied for.
Do you hold a full, clean driving licence valid in the UK? Yes No

If you are successful you will be required to provide relevant evidence of the above details prior to your appointment.

Intentionally blank. Please continue to section 2 below.

Section 2 Present Employment

Present Employment (If now unemployed give details of last employer)

Name of Employer:

Address:

Postcode:

Post Title:

Date of Appointment:

Salary:

Department / Section:

Brief description of duties:

Continue on a separate sheet if necessary

Period of Notice:

Last day of service

(if no longer employed):

Reason for leaving

(if no longer employed):

Section 3 Previous Employment

Previous Employment (most recent employer first). Please cover the last 10 years and state nature of business - if not third sector. If you are or have been involved in voluntary/unpaid activities, please also include this information.

Name of Employer:

Address:

Postcode

Position Held:

Summary of duties:

Date from:

Date Until:

Reason for leaving:

Name of Employer:

Address:

Postcode

Position Held:

Summary of duties:

Date from:

Date Until:

Reason for leaving:

Name of Employer:

Address:

Postcode

Position Held:

Summary of duties:

Date from:

Date Until:

Reason for leaving:

Continue on a separate sheet if necessary

Section 4 Education

Qualifications obtained from Schools, Colleges and Universities. Please list highest qualification first:

| College or University | Course | Qualifications and grades obtained |
|-----------------------|----------|------------------------------------|
| | | |
| School | Subjects | Qualifications and grades obtained |
| | | |

Continue on a separate sheet if necessary

Professional, Technical or Management Qualifications

Please give details:

| Professional/Technical/Management Qualifications | Course Details |
|--|----------------|
| | |

Membership of any Professional / Technical Associations- Please state level of Membership:

Continue on a separate sheet if necessary

Section 5 Training and Development

Please give details of any training and development courses or non-qualifications courses which support your application. Include any on the job training as well as formal courses.

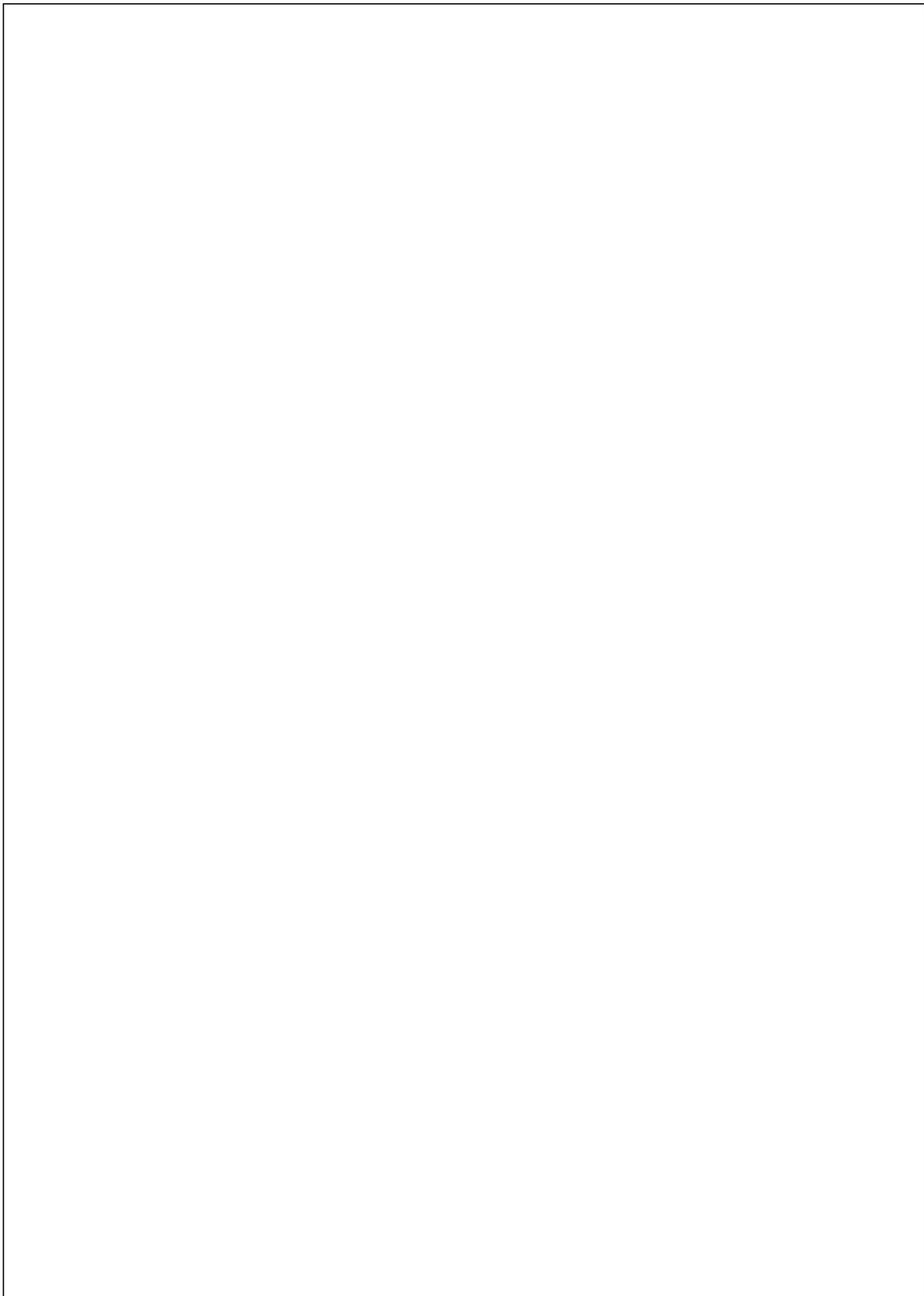
| Title of Training Programme or Course | Duration of Course |
|---------------------------------------|--------------------|
| | |

Continue on a separate sheet if necessary

Section 6 Personal Statement

Abilities, skills, knowledge and experience.

Please use this section to explain in detail how you meet the requirements of the Person Specification and job description. **2 pages only. Please do not exceed the given space, additional pages will not be considered**



Intentionally blank. Please continue to section 7 below.

Section 7 Rehabilitation of Offenders Act (1974)

Do you have any convictions that are unspent under the Rehabilitation of Offenders Act 1974?

Yes

No

If yes, please give details / dates of offence(s) and sentence:

Section 8 Protecting Children and Vulnerable Adults

The following information may be required if the post you are applying for has a requirement for a Criminal Records Bureau police check. (See Guidance Notes).

Enhanced Checks Only (refer to Job Application Pack)

Are you aware of any police enquires undertaken following allegations made against you, which may have a bearing on your suitability for this post?

Yes

No

Section 9 Reasonable Adjustments for Interview

Do we need to make any specific arrangements in order for you to attend the interview?

Yes

No

If yes, please give details:

Section 11 Recruitment Monitoring Form

Statement to be Signed by the Applicant

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I hereby certify that:

- all the information given by me on this form is correct to the best of my knowledge
- all questions relating to me have been accurately and fully answered
- I possess all the qualifications which I claim to hold
- I have read and, if appointed, am prepared to accept the conditions set out in the conditions of employment and the job description.

Signed:

Date:

Privacy statement

At Self Help UK we take your privacy seriously, we will never sell your data and will process and store your details securely in accordance with the requirements of the Data Protection Act 2018 and GDPR. We will only use the data you have provided on this form for recruitment purposes. If your application is unsuccessful, we will dispose of your details after six months. If your application is successful, this form will become part of your staff record.

Equal opportunities

To help us to monitor equal opportunities in our recruitment process, we ask for details of age, gender, ethnic group and disability. We will only use this to improve our recruitment process.

Please tick the consent box if you agree to your data being used for equal opportunities monitoring.

I consent

Yes

No

If you are returning this form by email, you will be asked to sign your application at interview.

RETURNING THIS FORM



By Hand or Post:

Job Application
Self Help UK
21-23 Pelham Road
Nottingham
NG5 1AP

By E-Mail:

recruitment@selfhelp.org.uk

Enquiries:

Telephone: 0115 9111 662

Intentionally blank.

This sheet will be separated from your application form upon receipt and does not form part of the selection process. It will be retained purely for monitoring purposes.

Application for the post of:

To help us ensure that our Equal Opportunities Policy is fully and fairly implemented (and for no other reason) please COMPLETE THIS SECTION OF THE APPLICATION FORM.

What is your Ethnic Group?

Choose ONE section from A to E, tick the appropriate box to indicate your cultural background.

Equal Opportunities Form

A. White

White UK

Irish

White non-UK

Any other White background
(please give details):

B. Mixed

White & Black Caribbean

White & Black African

White & Asian

Any other Mixed background
(please give details):

C. Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background
(please give details):

D. Black or Black British

Black Caribbean

Black African

Any other Black background
(please give details):

E. Chinese or other ethnic group

Chinese

Vietnamese

Any other ethnic background
(please give details):

F. I do not wish to provide this information

Equal Opportunities Form continued

Gender

Male

Female

Disability

Disability is defined as “physical or mental impairment, which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities”.

Do you consider yourself disabled?

Yes

No

If yes, please give details:

Present Status

Internal Applicant

External Applicant

Age Group

16-25

26-35

36-45

46-55

56-65

66-70

Over 70

Media

Please state where you saw this post advertised

For Office Use Only:

Start Date:

| | |
|--|--|
| | |
| | |