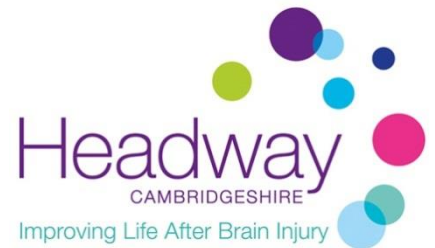


Application Form

Please complete each section fully
CVs will not be accepted



Application Received _____ Candidate Number _____

1. Details of Position Applied For

Application for the post of: _____

2. Personal Details (IN BLOCK CAPITALS PLEASE)

Title: _____ Surname: _____ First name: _____

Address (inc. Post Code): _____

Email: _____ Tel: _____

Do you have a clean, current, full driving licence? Yes No

Do you have regular use of a car for business use? Yes No

3. Do you have the right to work in the UK?

Yes No

Note: the Charity will require proof of this right before an offer of employment can be confirmed – e.g. passport and/or any other appropriate document required to confirm your right to work in the UK as required by the Asylum and Immigration Act 1996.

4. Disability Discrimination Act 1995

Section 1 of this Act describes a disabled person as a person with a 'physical or mental impairment which has a substantial or long-term effect on his/her ability to carry out normal day-to-day activities'.

Using this definition, would you consider yourself to be disabled? Yes No

If yes, do you require any special arrangements to be made to assist you if called for interview?

5. History of Employment

Present or most recent employer:

Position: _____ Salary: _____

Employer Address (inc. Post Code): _____

Employer's Business: _____

Date started: _____ Date left: _____

Reason for leaving (if applicable): _____

When could you commence working with us? _____

Previous employment (most recent first, including any voluntary work. Please use continuation sheet if necessary and ensure that all periods of time are accounted for)

From	To	Employer's name & address	Position	Reason for leaving (This section must be completed)

6. General and Further Education (including Professional/Technical Qualifications)

School/College/University/ Professional Body etc	From	To	Qualifications obtained/ Examinations pending	Grade/ level	Date(s)

7. Details of Courses Attended (e.g. managerial, professional etc.)

Course/Subject Title	Organised by	Date(s)

8. References

Names and addresses of two referees, including telephone numbers if possible, who can comment on your aptitude and experience in relation to the position applied for. At least one should be your present employer (school or college, if a student), or your most recent employer.

Reference 1

Name: _____

Address (inc. Post Code): _____

Email: _____ Tel: _____

Please state the capacity in which this referee knows you

Is it ok for us to contact this referee prior to interview? Yes No

Reference 2

Name: _____

Address (inc. Post Code): _____

Email: _____ Tel: _____

Please state the capacity in which this referee knows you

Is it ok for us to contact this referee prior to interview? Yes No

9. Supporting Information

With reference to the Person Specification, please give details of how your experience meets our criteria. If necessary please continue on separate sheet(s). (Please state how many pages are attached.)

10. Rehabilitation of Offenders Act 1974

Do you have any previous convictions (including convictions which for other purposes would be classed as 'spent' under the terms of the Rehabilitation of Offenders Act)? Yes No

If YES please give details of offence(s) and sentence on a separate sheet, enclosed in an envelope marked 'Confidential' and addressed to The Chief Executive of Headway Cambridgeshire.

11. Criminal Record Certificate(s)

Your initial employment is conditional upon the provision of a satisfactory enhanced Criminal Records check. You will be required to consent to subsequent criminal record checks from time to time during your employment as deemed appropriate by the Company. In the event that such certificate(s) are not supplied your employment with us will be terminated.

12. Convictions and Offences

During your employment, you are required to immediately report to the Company any convictions or offences with which you are charged, including traffic offences.

13. Declaration

I declare that the information on this form is true and complete. I understand that any wilful misstatement or omission renders me liable to dismissal if engaged.

Signature _____ Date _____

How did you hear of this vacancy? (If from an advertisement, please name the newspaper or journal)

Please return to:

HR, Headway Cambridgeshire, The Old Maltings, Ditton Walk, Cambridge, CB5 8PY

Equal Opportunities Monitoring

Candidate No: _____

The information provided on this form will only be used for the purpose of health and safety and statistics. The information given will be treated in the strictest confidence and processed in accordance with the Data Protection Act 1998.

1. **Gender**

- Male
 Female

2. **Ethnic group**

- White – British
 White – Irish
 White – any other White background (please state):
 Mixed – White and Black Caribbean
 Mixed – White and Black African
 Mixed – White and Asian
 Mixed – Any other mixed background (please state):
 Asian or Asian British – Indian
 Asian or Asian British – Pakistani
 Asian or Asian British – Bangladeshi
 Asian or Asian British – Any other Asian Background (please state):
 Black or Black British – African
 Black or Black British – Caribbean
 Black or Black British – Any other Black Background (please state):
 Chinese
 Other ethnic group (please state): _____
 Chosen not to disclose:

3. **Age**

- 16 – 25 years
 26 – 55 years
 55 – 64 years
 65+ years
 Chosen not to disclose

4. **Do you have a disability?**

- Yes No

If Yes, is your disability:

- Physical Sensory
 Mental Health Learning Disability
 Other (would you like to specify?) _____

5. **Do you have support needs?**

- Yes No