Application Form for External Applicants

Personal information (confidential)

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| **Application for Employment** | | | | | | | | | | | |
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| Return this form to: **recruitment@ymcatogether.org.uk** | | | | | | | | | | | |
| Position applied for: | | | | | | | | | | | |
| Have you been referred by a current member of staff: | | | | | | | | | | | |
| Do you have a relationship with any current member of staff or board member at the YMCA: | | | | | | | | | | | |
| **Personal Details** | | | | | | | | | | | |
| Title: | |  | | | | | | | | | |
| Name: | |  | | | | | | | | | |
| Address: | | | | | | | | | | | |
| Email: | |  | | | | | | | | | |
| Telephone (Landline): | |  | | | | | | | | | |
| Telephone (Mobile): | |  | | | | | | | | | |
| National Insurance No: | |  | | | | | | | | | |
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| Do you hold a current driving licence? | | | | | | Yes | |  | | No |  |
| Groups: | | | | | | | | | | | |
| Expiry date: | | | | | | | | | | | |
| Details of endorsements (if none, please insert “N/A”) | | | | | | | | | | | |
| Do you have a current right to work in the UK? | | | | | | Yes | |  | | No |  |
| If no, please provide details. | | | | | | | | | | | |
| **Education** | | | | | | | | | | | |
| Please provide your education history here: | | | | | | | | | | | |
| **Schools/Colleges/University** | | | | | **Qualification gained** | | | | | | |
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| **Employment History** | | | | | | | | | | | |
| Name & Address of employer(s) | | | Job title and main duties | | | | Dates of employment and reason for leaving | | | | |
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| Please note here any other employment that you would continue with if you were to be successful in obtaining this role: | | | | | | | | | | | |
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| **References** | | | | | | | | | | | |
| Please note here the names, company name (where applicable) and addresses of two persons from whom we may obtain both work and character references | | | | | | | | | | | |
| 1. | | | | 2. | | | | | | | |
| **Training** | | | | | | | | | | | |
| Please include any courses, membership, voluntary work or responsibilities you have obtained that you consider relevant, with outcomes where applicable: | | | | | | | | | | | |
| **Training Course Provider** | | | **Course/Qualification Title** | | | | **Duration of Course** | | | | |
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| **Voluntary or unpaid work experience**  Please start with the most recent first | | | | | | | | | | | |
| **Role Title** | **Name of voluntary group** | | | | **Duration** | | | | **Experience/**  **skills gained** | | |
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| **Hobbies & Interests**  Please tell us about yourself | | | | | | | | | | | |
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| **Declaration and Consent** | | | | | | | | | | | |
| For the purposes of compliance with the General Data Protection Regulation (GDPR) 2018, I hereby confirm that by completing this form I give my consent to Liverpool YMCA processing the data supplied above in connection with monitoring compliance with its equal opportunities obligations and policy. I also agree to the storage of this information on manual and computerised files.  I declare that the information I have given on this and any other documents forming my application is correct and complete. I accept that false or misleading information may be sufficient grounds for Liverpool YMCA unilaterally cancelling any agreements made, or for disciplinary action to be commenced. | | | | | | | | | | | |
| **Signed:** | | | | | | | | | | | |
| **Rehabilitation of offenders** | | | | | | | | | | | |
| Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 which means that spent convictions must be disclosed and will be taken into account in deciding whether to make an appointment. Any information will be completely confidential and will be considered only in relation to this application. In addition, you are required to submit to a Disclosure and Barring check. Any disclosure made by the Disclosure and Barring Service will remain strictly confidential.  Have you ever been convicted in a Court of Law and/or cautioned in respect of any offence? YES/NO (delete as required).  If yes, please give details below. If none write ‘NONE’ in the space below | | | | | | | | | | | |
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| **Declaration** | | | | | | | | | | | |
| I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment offered. I understand that any offer of employment is subject to the Company being satisfied with the results of series of relevant checks including references, eligibility to work in the UK, criminal convictions, probationary period and a medical report (in line with the operation of the Equality Act 2010). | | | | | | | | | | | |
| **Signed:** | | | | | | | | | | | |  | Date: |
| You may use a separate sheet to include more information on any of the above questions, if necessary, clearly marking the page number. | | | | | | | | | | | |