

CONFIDENTIAL

APPLICATION FOR EMPLOYMENT

Please complete in **BLACK** ink as it may be necessary to photocopy your application. Please complete all sections in full.

Please return all completed applications to: hrtgellenor.org or HR Department, ellenor Gravesend, Coldharbour Road, Gravesend, Kent, DA11 7HQ

Please state wher this position adve		ct			
tilis position dave	ruscu:				
PARTICULARS OF	THE POST APP	LIED F	OR:		
Post Title:					
Eligibility to wor	r k in the UK: You	ı will be	asked to provide	e evidence.	
Are there any rest work in the UK?	trictions on your r	ight to	Yes 🗆	No	
If you are success for employment, we permission to work	would you require		Yes 🗆	No	
If yes, please state expiry date of any		the			
PERSONAL DETA	ILS:			1	
National Insurance number:			Title:		
Surname:			Previous surname:		
Forenames:					
Professional Registration No: (i.e GMC, NMC, etc)					
Address:					
Postcode:					
Telephone: (Home)		Mob	oile:		
Email:					

EDUCATION

School/College/Ur	niversity	Subject	Dates:		Qualification	n		Grade(s)
PROFESSIONAL	QUALIF	CATIONS	AND	MEM	MBERSHIP	OF F	PROFESS	SIONAL

BODIES

Qualification:	Training/Professional Body:	Registration No:	Expiry:

OTHER RELEVANT TRAINING COURSES

Course Title:	Training Body:	Dates:	Result/Grad
			es:

-			1
CURRENT/MOST RECENT I Name and address	EMPLOYMENT of		
current/most recent employ			
	Doctordo		
	Postcode:		
Your job title:	Telephone No:		
Current/finishing salary:	£		
Dates of Employment:	From:	Т	o:
Reason for leaving:			
Notice period required:			
0.11:	11111		
Outline of your present/mos	st recent responsibilities:		

EMPLOYMENT HISTORY

(Starting with the most recent.) Please give details of all employment undertaken since leaving full-time education, include any paid employment and/or volunteering activities and <u>include details of gaps in employment</u>. (Continue on a separate sheet if necessary.)

Name and address of organisation/comp any:	Position plus a description duties:	held, brief of	Date from: (month/ye ar)	Date to: (month/ye ar)	Reason for leaving:

SUPPORTING STATEMENT Please outline your reasons for applying for this post at ellenor. Include details of the skills, knowledge and any relevant experience and training you feel you have which would mean you may be successful in the role. Please refer to the job description and person specification and include any other information you consider relevant (use a continuation sheet if necessary).

What activities outside work interest you? (State any positions held you consider relevant.)

REFERENCES

Please provide the names and contact details of **two employer referees** to cover the last 5 years. One must be your present or most recent employer or your school/college if you are a student. They should be able to provide information relating to your experience and qualifications for this position.

Friends, relatives or work colleagues are not acceptable as referees.

Name:		Capacity in whick	ch	
Company Name and Address:		Email:		
		Telephone No:		
Name:		Capacity in whick known to you:	ch	
Company Name and Address:		Email:		
		Telephone No:		
References will be sought after an offer of appointment has been made and your permission has been given.				
Do you hold a fu	Il current driving licenc	œ:	YES □	NO 🗆
Do you own/have access to a car?		YES □	NO 🗆	
DECLARATION: (Please read this section carefully before signing your application.)				

- 1. I confirm that the information included in this application is complete and correct and that any untrue, misleading or withheld information will give ellenor the right to reject my application, to withdraw any offer of employment or, if employed, to effect instant dismissal without notice.
- 2. I acknowledge that my employment with **ellenor** is subject to satisfactory references, health check and, where appropriate, a DBS check.
- 3. I consent to **ellenor** processing my personal data, as well as my sensitive personal data, given here (and on the Equality and Diversity Monitoring Form for the purposes of Equality and Diversity Monitoring) for purpose of my employment, for administrative and for the purpose of complying with applicable laws, regulations and procedures.

Signature of Applicant:	
Date:	

If you have not heard from us within two weeks of the closing date, your application has not been successful. We regret it is not possible for us to reply to everyone personally.

EQUALITY AND DIVERSITY MONITORING FORM

In accordance with our Equality and Diversity Policy, we monitor job applications to ensure that we provide equality to any job applicant and make sure that discrimination does not occur because of race, sex, sexual orientation, gender reassignment, religion or belief, marital or civil partnership status, age, disability, pregnancy and maternity. So that we can assess the success of this policy, we have set up a system for monitoring all job applicants. We would be grateful if you would complete the questions on this monitoring form. We have asked for your name to enable us to monitor applications at the shortlisting and appointment stage. All information supplied will be treated in confidence and will not be seen by any staff directly involved in the appointment. The monitoring form will be detached from the application form, stored separately, and used solely to provide statistics for monitoring purposes.

The information you provide will be stored either on paper records or a computer system in accordance with the Data Protection Act 1998 and will be used solely to monitor the diversity of **ellenor's** recruitment regarding equality and diversity issues.

Diversity Information: This allows us to be able to observe the diversity of our				
employees. You do not have to answer any	of these questions, but we'd be			
appreciative if you would.				
Your Gender:	Is your Gender Identity the same as			
□Prefer not to say	the gender assigned at birth?			
☐Male (Including Trans Male)	□Prefer not to say			
☐Female (Including Trans Female)	□Yes			
□Non-binary	□No			
□Other Gender Identity				
Your Nationality:	Your ethnicity:			
□Prefer not to say	□Prefer not to say			
☐British or mixed British	White			
□English	□ English, Welsh, Scottish,			
□Irish	Northern Irish or British			
□Scottish	☐ Gypsy or Irish Traveller			
□Welsh	□Any other White background			
□Any other	Dual Heritage			
If you have chosen any other, please	□White and Black Caribbean			
specify:	□White and Black African			
Your religion/belief:	□White and Asian			
□Prefer not to say	□Any other Dual Heritage			
□Atheist	background			
□Buddhist	Asian or Asian British			
□Christian	□Indian			
□Hindu	□Pakistani			
□Jewish	□Bangladeshi			
□Muslim	□Chinese			
□Sikh	□Any other Asian background			
□No religion	Black, African, Caribbean or Black			
□Other religion or belief	British			
	□African			
If you have chosen other	□Caribbean			
religion/belief, please specify:	□Any other Black or African or			
	Caribbean background			
	Other ethnic group			
	□Arab			
	□Any other ethnic background			

	If you have chosen any other ethnic background, please specify:
Your Sexual Orientation, please specify	':

All information contained in this form and any attachments will be treated in the strictest confidence and will be retained under the Data Protection Act 1998.