**Employment**

**application form**



Please read the job description and person

specification before completing this form.

**Form no. R**

Post

|  |
| --- |
| Occupational Therapist – Queensmill School  **Please complete**  **and return to:**  Caroline Bulmer by email to:  ([cbulmer.205@lgflmail.org](mailto:cbulmer.205@lgflmail.org)) |

Grade Post No.

|  |  |
| --- | --- |
| Band 6 |  |

Closing date for receipt of this application

|  |
| --- |
| 17/11/17 (closing date may be brought forward once sufficient applications have been received so please apply as soon as possible) |

**1 PERSONAL DETAILS**

Your last name/family name Forename(s)

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

Permanent home address Postcode

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

Email address

|  |
| --- |
|  |

Home telephone no. Work telephone no. Including extension (if applicable)

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

Internal extension no. If currently employed by the council Mobile no.

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

Do you have the right to live and work in the UK?  YES  NO

(you will be required to verify this)

National Insurance number (you will be required to verify this)

|  |
| --- |
|  |

**2 CURRENT OR MOST RECENT APPOINTMENT**

Are you currently employed by this council?

If **yes**, complete section (a) below

If **no**, complete section (b) below

**(a) Current employees of Hammersmith & Fulham Council**

Department/section Title of post

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

Grade/salary Starting date

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

**(b) External applicants - where you work now, or your last job**

Employer’s name

|  |
| --- |
|  |

Employer’s address

|  |
| --- |
|  |

Starting date Leaving date (if applicable)

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

Position held Grade/salary

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

Nature of work/Responsibilities

|  |
| --- |
|  |

When could you be available for work, or what notice period is required by your current employer?

|  |
| --- |
|  |

Reason for leaving if no longer employed

|  |
| --- |
|  |

**3 REHABILITATION OF OFFENDERS ACT 1974**

Do you have any criminal convictions, bindovers, formal warnings or cautions, including those considered ‘spent’ under the Rehabilitation of Offenders Act 1974 (please see attached policy on employing reoffenders)?

YES  NO

If YES please give details

|  |
| --- |
|  |

**4 PREVIOUS APPOINTMENTS**

**What jobs have you had in the past?**

Please list all your previous appointments. This should also include voluntary and temporary work. Extend the table if necessary.

Dates employed Name & address Position held & Reason for

to/from of employer nature of work leaving

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| --- | --- | --- | --- |
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**5 QUALIFICATIONS AND RELEVANT TRAINING**

Please list all relevant training. Extend the table if necessary.

|  |  |  |
| --- | --- | --- |
| Name of university/college/  training provider | Qualification/grade/skills gained | Date |
|  |  |  |
|  |  |  |
|  |  |  |

You may be required to provide evidence of any academic qualifications stated.

**6 SUPPORTING STATEMENT**

**How you meet the selection criteria**

Drawing upon your experience, skills, abilities and qualifications explain how you meet the selection criteria within the person specification. Also take note of the job description.

Please try and limit your response to no more than four sides of A4 (please read advice notes).

|  |
| --- |
|  |

**7 DETAILS OF REFEREES**

**CURRENT EMPLOYEES OF THE COUNCIL**

Please give the name, work location and telephone number of your current line manager in the section marked 1st Referee.

**EXTERNAL APPLICANTS (including agency staff currently working for the council)**

Please give the names and addresses of two referees. One should be your present employer, or your most recent employer if you are currently unemployed. Both referees should have been in a position of responsibility within the employing organisation(s). If you are unable to provide these please give details of someone who knows you in other than a personal capacity and who is prepared to provide a reference for you. They must not be related to you, or be a friend.

**1st REFEREE 2nd REFEREE**

Name Name

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

Organisation name and address Organisation name and address

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

Post code Post code

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

Telephone no./ext and email address Telephone no./ext and email address)

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

Position held Position held

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

Connection with applicant Connection with applicant

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

May we contact this person before May we contact this person before

interview?  YES  NO interview?  YES  NO

If you were known by another name If you were known by another name  
when employed please specify: when employed please specify:

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

Dates of employment to/from (if applicable) Dates of employment to/from (if applicable)

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

**8 RELATIONSHIP TO CURRENT  
 EMPLOYEE/COUNCILLOR**

To your knowledge, are you related to or closely connected to any councillor or employee of the council?

YES  NO

If YES please give details

|  |
| --- |
|  |

**9 IMPORTANT INFORMATION**

### Please read before signing this application form

The accuracy of information provided may be checked with other organisations. Provision of false or misleading information may amount to a criminal offence.

The council may obtain from or provide information to third parties for the purposes of the detection and prevention of crime.

The council may data match information it holds about its employees for the prevention and detection of crime.

### Declaration

I accept that the offer of employment is conditional on the provision by me of true, accurate information with no material omissions.

I give my consent to the council making such reasonable enquiries as it sees fit in respect of my application.

As part of this application I agree to the provision of background character information being obtained from the criminal records bureau under the terms of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 and the checks requested are in accordance with the relevant legislation. I (the job applicant) confirm that the information provided in support of this application is accurate and true and that I have not omitted any material facts. I understand that knowingly to make a false statement for this purpose is a criminal offence and will mean that any provisional offer of employment made to me will be withdrawn, or if in post, will lead to the termination of my contract of employment without notice.

Signature Date

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

(Can be signed electronically and emailed or signed by hand then scanned)

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Recruitment Monitoring Form** | | | | | | | |  |  |  | | |
| Hammersmith & Fulham Council has a legal duty to promote equality and diversity, both as an employer and as a service provider.  As part of this duty, we are legally required to monitor the diversity of our applicants. By not completing this form we are unable to meet our responsibilities and therefore we encourage you to spend a few minutes undertaking this task.  Please be assured that the information you provide will be used for statistical purposes only and will help us to monitor our employment processes.  Please select the most appropriate box in each section using a cross. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Full Name:** |  | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| **Department:** |  | | | | | **School:** |  | | | | | |
|  |  | | | | | | | | | | | |
| **GENDER:** |  |  |  |  | **DISABILITY:** | | |  |  |  |  |  |
| I am | Female |  |  |  | Do you have a physical or mental impairment which has a substantial and long term adverse effect on your ability to carry out normal day to day activities? | | | |  | Yes |  |  |
|  |  |  |  |  |  |  |  |
| Male |  |  |  |  | No |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | Prefer not to say |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | | | | | | | | | | | | |
| **ETHNIC GROUP: I would describe myself as:** | | | | | | | | | | |  |  |
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| WHITE | British |  |  |  | English | | |  |  | Scottish |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | Welsh |  |  |  | Northern Irish | | |  |  | Irish |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | Gypsy or Irish Traveller |  |  |  | Any other White background | | |  |  |  |  |  |
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| ASIAN OR ASIAN BRITISH | Indian |  |  |  | Pakistani | | |  |  | Bangladeshi |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | Chinese |  |  |  | Any other Asian background | | |  |  |  |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
| **Please turn over** | | | | | | | | | | | | |
|  |  |  |  |  |  | | |  |  |  |  |  |
| BLACK OR BLACK BRITISH | African |  |  |  | Caribbean | | |  |  | Any other Black background |  |  |
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| MIXED | White and Black Caribbean |  |  |  | White and Black African | | |  |  | White and Asian |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | Any other Mixed background |  |  |  |  | | |  |  |  |  |  |
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| OTHER ETHNIC GROUP | Arab |  |  |  | Any Other Ethnic background | | |  |  |  |  |  |
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|  |  |  |  |  |  | | |  |  |  |  |  |
|  | | | | | | | | | | | | |
| **RELIGION/BELIEF: I would describe myself as:** | | | | | | | | | | | | |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | No Religion |  |  |  | Christian (including all Christian denominations) | | |  |  | Buddhist |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | Hindu |  |  |  | Jewish | | |  |  | Muslim |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | Sikh |  |  |  | Any other religion | | |  |  | Prefer not to say |  |  |
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| **SEXUAL ORIENTATION: I would describe myself as:** | | | | | | | | | | |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | Heterosexual |  |  |  | Gay | | |  |  | Lesbian |  |  |
|  |  |  |  |  |  | | |  |  |  |  |  |
|  | Bisexual |  |  |  | Prefer not to say | | |  |  |  |  |  |
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| **Thank you for taking the time to complete this form.** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Confidentiality** | | | | | | | | | | | | |
| **All personal data is processed in accordance with the terms and conditions of the Data Protection Act 1998.** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Please return recruit monitoring form only to:** Smart HR, Room 142, Hammersmith Town Hall, King Street, London W6 9JU | | | | | | | | | | | | |