

Application for Employment - Confidential

Post Reference: Post Title:

Where did you first see this vacancy (please tick box below)?

Guardian Mercury TES

FEjobs.com College Website Staffnet

Other... Please specify:

Confidential

The College is committed to achieving equality of opportunity for all who work and study here, free from discrimination on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

1. Personal Details

Title: Address:

Forenames:

Surname:

Postcode:

Home Telephone No: Daytime Telephone No:

Mobile: Email address:

DfEE No (if applicable):

Are you a British Citizen? Yes No

If **no**, please indicate your citizenship below (for details of countries under these categories, please refer to the Notes of Guidance for completing the Application Form).

a) From the European Economic Area (EEA) and Switzerland? Yes No

b) From the European Economic Area (EEA) Accession States (A8)? Yes No

c) From the European Economic Area (EEA) Accession States (A2)? Yes No

d) From any other country outside the European Economic Area? Yes No

If yes to d), please indicate the type of visa/work permit you hold:

Indefinite leave to remain Yes No

Time bound leave to remain Yes No

Car owner? Yes No Current Driving Licence Yes No

Complaints

If you feel that you have been treated in an unfair or unlawful way, at any stage of your application, you should contact the Human Resources Manager.

Please return this form to Hertford Regional College, HR Department, Ware Campus, Scotts Road, Ware, Herts, SG12 9JF by the advertised closing date for applications.







2. Education and Qualifications

2a. Other Qualifications and Training Courses Completed

Attended/awarded

2b. Membership of Professional Associations

Awarded and type of membership

2c. If you have taught in the FE sector, please state below the date you first started teaching in FE.

















3. Presen	t or most	recent employment					
Name of	Employer			Post held:	FT/PT		
Address:				From Month:	Year:		
				To Month:	Year:		
Postcode	:			Current salary:			
Telephon	e No:			Notice required:			
Reason fo	or leaving	or wanting to leave (if not	currently em	ployed):			
Please gi	ve a brief	description of roles and du	ıties:				
4 Proviou	us Employ	mont					
4. Previous Employment Starting with the most recent and using a continuation sheet if necessary.							
Please also give brief details of gaps in your employment history.							
From MM/YY	To MM/YY	Employer Name and Address	F/T or P/T	Post Held	Reason for leaving and salary		
		1	I	1			

	MM/YY	MM/YY	Address	.,,.	and canal,
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5. Supporting Statement

Please give a full description of how you consider your knowledge, skills and personal qualities meet the requirements of the post as outlined in the person specification and job description, using a continuation sheet.

6. References References may be taken up for all shortlisted candidates before in the appropriate referee. Two references are required. One references	
1. Name:	Occupation/Relationship:
Address:	Daytime Telephone Number (inc STD code):

Address:

Post Code:

Please mark "X" in the box if you do not wish this reference to be taken up before interview.

Name:

Occupation/Relationship:

Address:

Daytime Telephone Number (inc STD code):

Email address:

Post Code:

Please mark "X" in the box if you do not wish this reference to be taken up before interview.

7. Parental Leave

Please give details of any parental leave you have taken.

Days

Dates

8. Additional Information

a) Are you related to a current member of the College staff? Failure to disclose such information may disqualify you.

Yes No If yes, please give details:

b) Canvassing of people on the appointment panel, with a view to promoting your application, may disqualify you.

Rehabilitation of Offenders Declaration

Posts involving working with children (under the age of 18), older people, those with disabilities, learning difficulties and other vulnerable groups are exempt from provisions of Rehabilitation of offenders Act 1974. If you are applying for work in this area you are required to state whether or not you have any convictions or criminal charges or summonses pending against you whether or not your conviction is regarded as "spent". If the post has not been exempted then you must also disclose any convictions found against you which are not spent under the terms of the Rehabilitation of Offenders Act 1974. All successful applicants will be required to have an enhanced Criminal Records Bureau disclosure (see information for applicants).

Have you ever received a caution or been convicted of any criminal offence? Yes No

If yes, please give details and date(s):

Confirmation of Details

I hereby confirm that all the information given in this application is correct to the best of my knowledge, that all the questions related to me have been accurately and fully answered and that I am in possession of the qualifications I claim to hold.

I understand that the information given in this application will be held on computer and processed in accordance with the Data Protection Act 1998 and that I consent to the storage and use of such information for employment and monitoring purposes.

I have read and signed the statement of data protection and data processing. For online applications we will consider electronic submission as acceptance of the above terms.

Signature: Date:

Equality and Diversity Monitoring

HRC wants all its employees to benefit from our commitment to equal opportunities and a diverse workforce. Our policy is to ensure that we employ you solely on the basis of your ability and the requirements of the job. We are constantly monitoring our employment practices to ensure that no potential or current employee of the College is discriminated directly or indirectly in recruitment or employment because of any of the protected characteristics in the Equality Act 2010. These are age, disability, gender reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion or belief, sex and sexual orientation. The information you provide below will help us.

Please note that this form will be separated from your application and kept securely. It will not be seen by the staff responsible for shortlisting or interviews, and your name will not appear on any College statistics.

Please complete in BLOCK CAPITALS, using black ink and ticking the boxes which most closely relate to you.

Position applied for:

Post No:

Sex

Age

Full Name:

Male

16-21

41-50

65 +

Single

Married/Civil Partner

No

Marital Status

How did you hear about this vacancy?

Are you currently employed by HRC? Yes

Nationality:

Ethnic Origin

Asian or Asian British - Bangladeshi

Asian or Asian British - Indian

Asian or Asian British - Pakistani

Asian or Asian British - any other

Black or Black British - African

Black or Black British - Caribbean Black or Black British - any other

Mixed - White & Asian

Mixed - White & Black African Mixed - White & Black Caribbean

Mixed - any other Mixed background

Any other:

Sexual Orientation

What is your sexual orientation?

Heterosexual

Transgender

Gay man or lesbian

Bisexual

What is your religious belief?

Religious Belief

Christian Muslim

Hindu

Sikh

Jewish

Buddhist

None

Do not wish to disclose

Do not wish to disclose

Other (please specify):

Female

Date of Birth:

22-30

51-60

60-65

31-40

Divorced

Widow

White - Greek

White - Greek Cypriot

White - Italian

White - Kosovan

White - Turkish

White - Turkish Cypriot

White - E. Europe

White - British

White - Irish

White - any other

Chinese

Dependants

We understand persons with dependants to be those with personal responsibility for the care of a child, the care of a person with an incapacitating disability and/or the care of a dependant elderly person.

Do you have dependants? Yes No

Disability

As defined by the Equality Act 2010, a person is disabled if they have a physical or mental impairment which has a substantial and long term adverse effect on their ability to carry out normal day to day activities.

Do you have an impairment which affects normal day to day activity? Yes No

No

Please tick all of the boxes which are appropriate:

Visual impairment

Speech impairment

Other physical disability

Mental ill health

Profound/complex disabilities

Other disability

Is this a progressive disability? Yes

How long have you had your disability?

Approximate in years (please give amount of years):

Since birth

Please state any adjustments that you require to be made:

Hearing impairment

Disability affecting mobility

Other medical condition

Temporary disability following illness

Multiple disabilities

No disability