

**Application Form**

To be completed in typed form or in your own handwriting in black ink.

The recruitment process within this organisation has a minimum of two stages.

The completion of this application is part of stage one. The application will be reviewed and a decision made as to whether to proceed to stage two, the interview based on this information.

**Application Instructions**

Once you have completed your application form, please email it to HR@optionsforlife.info. If you require any advice on completing your application form, please call us on 0121 544 6611.

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| **Post Applied for:** | Support Worker PMLD | **Application Number:** **(Added by OfL)** |  |
| Have you previously applied for a post with Options for Life? | **□** Yes **□** No |
| Are you over **18 Years Old** | **□** Yes **□** No |

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| **Personal Details** | Title: |  |
| **Forename(s) or other names** |  |
| **Surname** |  |
| **Address** |  |
|  |
|  |
|  | Postcode:  |
| **Telephone**  | Home:  |  |
| Mobile:  |  |
| **Email Address** |  |

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| Are you free to remain and take up employment in the UK? If ‘no’, please specify what restrictions have been placed:  | □ Yes □ No  |
| Are you subject to immigration control? If ‘yes’ please give details: | □ Yes □ No  |

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| To the best of your knowledge do you have any business or personal interests that may be relevant to the work of Options for Life, and which could lead to a real or perceived conflict of Interest were you to be appointed? (failure to disclose such information may invalidate any subsequent contract of employment) If yes please give details:  | □ Yes □ No  |
| To the best of your knowledge are you related to, or have a close association with any of Options for Life’s staff, volunteers or participants? If ‘yes’, please state who and the relationship: | □ Yes □ No  |
| Do you have any special requirements, or do you need any special equipment to assist you in the recruitment process?If ‘yes’, please give details:  | □ Yes □ No  |
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| Options for Life is committed to equal opportunities. The elimination of discrimination, harassment and any other conduct prohibited under the Equality Act 2010, and the advance of equality of opportunity are fundamental to the aims and objectives of Options for Life.This Monitoring Form will be used to help us measure our performance and progress towards our equality and diversity goals.The request for this information and how it will be used are within the scope of the Data Protection Act 1998, which allows for the collation and reporting of sensitive data for monitoring purposes.  |
| **Gender**  |
| Female  |  |
| Male  |  |
| Prefer not to say |  |
| **Age**  |
| 18-24  |  | 50-59 |  |
| 25-29 |  | 60-64 |  |
| 30-39 |  | 65+  |  |
| 40-49 |  |  |
| **Sexual Orientation**  |
| Bisexual  |  | Lesbian/Gay Woman |  |
| Gay Man |  | Heterosexual/Straight  |  |
| **Religion/ Belief**  |
| Buddhist  |  | Christian  |  |
| Muslim  |  | Sikh |  |
| Hindu |  | Jewish  |  |
| Other  |  | None  |  | Prefer not to say  |  |
| **Ethnic Origin**  |
| Asian or Asian British- Bangladeshi  |  | Asian or Asian British- Chinese  |  |
| Asian or Asian British- Indian |  | Asian or Asian British- African  |  |
| Asian or Asian British- Pakistani  |  | Asian or Asian British- Other |  |
| Black or Black British- Caribbean |  | Mixed Ethnic- White & Asian  |  |
| Black or Black British- African  |  | Mixed Ethnic- White & Black Caribbean |  |
| Black or Black British- Other  |  | Mixed Ethnic- White & Black African  |  |
| Mixed Ethnic Group- Other |  | Other Ethnic Group- Arab |  |
| White- Irish |  | White- Welsh/English/Scottish/ N. Ireland |  |
| White- Gypsy or Irish Traveller |  | White- Other |  |
| Any other ethnic group (not listed) |  |
| **Disability** At Options for Life, we define a disability as “a physical or mental impairment which might affect the person’s ability to effectively undertake their working duties and/or which might require some special adjustments to their work or place of work and/or which has a substantial and long-term adverse effect on the person’s ability to carry out normal day-to-day activities”.Using this definition, do you consider yourself to have a disability? Yes 🞏 No 🞏 If ‘yes’, please specify: |
| Hearing Impairment  |  | Visual Impairment |  |
| Learning Disability  |  | Learning Difficulties |  |
| Neurological condition |  | Mental Health Condition |  |
| Physical co-ordination difficulties  |  | Mobility Impairment  |  |
| Physical Impairments  |  | Reduced Physical Capacity |  |
| Speech Impairment  |  | Sensory Impairment |  |
| Long standing illness or health condition |  |  |
| Other  |  | None  |  | Prefer not to say |  |

**Please continue to the next page.**

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| **Application number: (Added by OfL)** |  |
| **Qualifications**  | **Qualifications Achieved- School/ College/ university and any relevant training:**  |
| **Qualification / Training**  | **From**  | **To**  |  |
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| **Employment History (Please include current employment)**  |
| **Previous Employment** | **Please list in chronological order with your most recent post listed first including temporary, casual and short term jobs** (Please give your full employment history since leaving school. If you require extra space please attach an additional sheet) |
| **Employer Name, Address including Telephone Number** | **Date(s) employed** | **Position(s) held and salary** | **Reason for leaving** |
|  |  |  |  |
| **Gaps in employment (Please include reason)** |
|  |
| **Disciplinary Proceedings**  |
| Are you currently undergoing any disciplinary proceeding?If ‘yes’, please give details: | □ Yes □ No  |
| Have you ever been dismissed from a post because of misconduct, or resigned pending the solution of disciplinary?  | □ Yes □ No  |
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| **Criminal Convictions and Cautions** An enhanced DBS check and a check of DBS barred lists will be requested in the event of successful application. Any information you will give will be treated as strictly confidential and will only be seen by people involved in the recruitment process. Previous conviction(s) will not necessarily debar you from being employed by Options for Life.  |
| Have you ever been convicted over a criminal offence (that is not protected as defined by the rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020)  | □ Yes □ No |
| If yes, please give details (Please include cautions and spent criminal convictions in line with the guidance above):  |  |
| Have you ever been the subject of any abuse investigation or enquiry?If ‘yes’, please give details:  | □ Yes □ No |
| **Supporting statement** **Please tell us why you would like to be considered for the job:** |
|  |
| **Data Protection**  |
| By returning this form, you consent to Options for Life using and keeping information about you provided by you relating to your application or future employment. This information will be solely in the recruitment process and will be retained for six months from the date on which you are informed whether you have been invited for interview. Such information will be shared only in compliance with the law and the purpose of monitoring the organisations practises to ensure equality of opportunity, and will be treated confidentially.  |