

# Employment Application Form (PH)



This application form can be filled in electronically via a computer or laptop. To do this the form needs to be downloaded and completed. Alternatively you can print a copy of the form and complete in writing. If you require help in completing this form please ring 01543 431495 and ask for The People Team.

Newlife is proud to be a “disability confident employer” and is committed to providing equal access and opportunity to all of its employees irrespective of age, gender, sexual orientation, race, religion or belief; or disability.

Please complete this application form fully as incomplete forms may not be reviewed. You may attach your CV as additional information in support of your application but not as an alternative to completing the form.

Newlife does not acknowledge receipt of applications; if no contact has been made within six weeks of applying applicants should assume they have been unsuccessful.

## Key Information

Position Applied For			
Job Ref Number			
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state) .....		
First Name			
Family Name			
House No. & Street			
Town			
County		Postcode	
Contact Numbers (please provide a number(s) that you can be easily reached on during the day or where we can leave a message)		..... .....	
Email Address			
How did you find out about this vacancy?		<input type="checkbox"/> Newlife Website <input type="checkbox"/> Online Job Board <input type="checkbox"/> Job Centre <input type="checkbox"/> Poster in Newlife store                   Other (please state) .....	
Have you ever worked or volunteered for Newlife before? If so please provide details:			
Do you have any friends or relatives currently employed by Newlife? If so, who?			
Are there any reasonable adjustments which you feel should be made to the recruitment process to assist your application? If yes, what adjustments do you require?			

## Employment History

### Current Employment

Company			
Job Title			
Period of Employment	From		To
Reasons for seeking other employment			
Key Responsibilities / Achievements			
Period of Notice			
Current or Final Salary		Salary Sought (if different)	

### Previous Employment

1. Company			
Job Title			
Period of Employment	From		To
Reasons for seeking other employment			
Key Responsibilities / Achievements			
Finishing Salary			

### Previous Employment

2. Company			
Job Title			
Period of Employment	From		To
Reasons for seeking other employment			
Key Responsibilities / Achievements			
Finishing Salary			

### Previous Employment

3. Company			
Job Title			
Period of Employment	From		To
Reasons for seeking other employment			
Key Responsibilities / Achievements			
Finishing Salary			

## Education

Please begin with your most recent qualification.

School / College / University	Qualification Obtained	Date Obtained

## Professional Skills

Please state any training you have undertaken during employment.

Professional Skills / Qualifications i.e First Aid	Awarding Body / Organisation	Date Obtained

## Role Requirements

Referring to the Job Description please provide details of how your experience and skills meet the essential and desirable requirements of this post.

Free text space

## Role Requirements

Other Particulars	
Do you have any unspent criminal convictions or outstanding proceedings in relation to a criminal offence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide details:	
(We reserve the right to carry out a police check where necessary)	
Do you have legal rights to work in the UK?	<input type="checkbox"/> Yes <input type="checkbox"/> No
(You will be required to provide proof of your eligibility to work in the UK if you are invited for interview)	
If offered the position, do you intend to continue working in any other capacity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide details:	
Having reviewed the Job Description, are there any reasonable adjustments which may need to be made to the job itself to enable you to carry out your daily duties?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide details:	

As a disability confident employer this information is needed so that all disabled applicants who meet the minimum criteria for this post are offered an interview.

## References

Please provide details of two references from two previous employers in the last 5 years, with reference 1 being your current or most recent employer. If this is not possible (because you have not been in previous employment or have worked for the same employer for more than 5 years) then please also provide details of a character reference from a professional person i.e. a person of standing in the community. If you are a school/college/university leaver please also provide details of your school/college/university as well as a character reference.

Two satisfactory references will be required and any offer of employment will be subject to these being received within 8 weeks of employment commencing.

### Referee 1

Name		
Job Title		
Company Name		
Email		
Address		
County		Postcode

### Referee 2

Name		
Job Title		
Company Name		
Email		
Address		
County		Postcode

### Referee 3 (Character Reference)

Name		
Job Title		
Company Name		
Email		
Address		
County		Postcode

### Data Protection Act 1998

The information you provide will be held in accordance with provisions of the Data Protection Act 1998, Newlife the Charity for Disabled Children are registered data controllers under the act.

### Declaration

I confirm that the information given on this form is to the best of my knowledge, accurate and complete. I understand that any false statement may be sufficient for rejection of application or withdrawal of offer or if employed, dismissal where the circumstances warrant this.

Signature

Date

### Returning your form

Electronically – if you have completed your form electronically or wish to scan in your hand completed form please email to [peopleteam@newlifecharity.co.uk](mailto:peopleteam@newlifecharity.co.uk)

By Post – if you wish to return your form by post, please address as follows:

The People Team  
Newlife  
Newlife Centre  
Hemlock Way  
Cannock  
WS11 7GF