

### **Hull Churches Housing Association Limited**

Studio 701

17 Princess Street

Hull HU2 8BJ

### **Application for Employment**

Please complete the form legibly in black ink so it may be photocopied. Also please attach any additional information which you think would benefit your application. Please note CVs will not be accepted in whole or part replacement of this application.

**POST APPLIED FOR:** 

How did you hear of this vacancy?	
Personal Details	
Surname:	Ms/Miss/Mrs/Mr:
First names:	
Contact Information	
Address:	
Postcode:	
Email:	Mobile:
Home telephone:	Work telephone:

## Education

Schools, colleges and universities attended	From	То	Courses taken/qualifications achieved (with levels) **
** Please note you will be required t	to produce con	ificatos	or proof of achievement to validate your

<sup>\*\*</sup>Please note you will be required to produce certificates or proof of achievement to validate your qualifications.

## **Professional Qualifications**

Awarding body / institution	Qualification(s)obtained	Dates

## **Training**

Please tell us about training or courses attended as part of your continuous professional development

### **Employment & Work Experience**

In this section we want to know about your history of employment starting with your most recent experience. Please let us know all details, explaining any gaps in dates

### **Current or most recent employment**

Name of employer:				
Employer address:				
Employer address.				
Final control		<b>T.</b> I I		
Employer postcode:		Telephone nu	umber:	
Post held:				
Date of appointment	From:		То:	
Date of appointment	T TOTTI.		10.	
	_			
Annual salary £ (Include pay scale if relevant)	Starting:		Current/ final:	
(morado pay odalo ii rolovani)				
Other benefits (e.g.: bonus of	r car allowance)			
Cummary of duties and res	nanaihilitiaa			
Summary of duties and res	porisibilities			
Period of notice required:				
Reason for leaving:				

## Work experience history

Name and address of previous employ	er:		
Position held	From	То	Annual salary
- Collier Hold			7 ii ii i dai dai ai y
BASS I Committee of Program			
Main duties and responsibilities			
December leaving			
Reason for leaving			
Name and address of previous employ	er:		
	T	T	1
Position held	From	То	Annual salary
Main duties and responsibilities			
•			
Reason for leaving			
Name and address of previous employ	er:		
Position held	From	То	Annual salary
T COMOT TICK	1 10111	10	7 ti ili dai daiai y
NA-2-1 C			
Main duties and responsibilities			
B (c. lee lee			
Reason for leaving			

Name and address of previous er	mployer:		
Position held	From	То	Annual salary
			,
	I	I	L
Main duties and responsibilities			
Main added and responsibilities			
Reason for leaving			
Name and address of previous er	mployer:		
Position held	From	То	Annual salary
Main duties and responsibilities			
Reason for leaving			
Name and address of previous er	mployer:		
Position held	From	То	Annual salary
	•		
Main duties and responsibilities			
Reason for leaving			

## **Supporting Information**

Please tell us concisely how your skills, qualifications, and experience match those					
required of the post as set out in the person specification and job description. Use					
these criteria to tailor your application and show why you are suitable, how you fit					
the principal accountabilities and what you bring to the post. (Continue on the following					
page (s) if needed)					

Supporting Information continued
- Capporting information communication

Supporting Information continued

### Referees

Please give details for two referees. If you are or have been employed the first referee must be your current or latest employer. The second referee should be from a previous employer or someone you have worked with in a voluntary or paid capacity if your employment history is limited.

Referee 1 (Previous employer)		Referee 2 (Previous employer)							
NI				Ni					
Name:				Name:					
Job title:				Job title:					
A 1 1				A 1 1					
Address:				Address:					
Postcode	e:			Postcode:					
Talamban		(2):		Talamban		-1.			
i elepnor	ne number	(s):		Telephone	e number(	s):			
Email:				Email:					
	ake up this			May we take up this reference without contacting you beforehand?					
Yes		No		Yes		No			
Additional Information									
Do you h	ave a full	current d	riving licend	ce?		Yes		No	
Do you h work pur		s to a ca	r or alternat	ive transpor	t for	Yes		No	
				e not availab					iday
commitm	ents we w	ould nee	d to honour	, should you	ır applicati	on be s	succe	essful	

### **Declarations**

### **Interests**

Are you related to, or do you have close personal relationship with, any employee or Board Member of the Association, or its subsidiary, HCHA Trinity Limited?	Yes	No	
Are you related to, or do you have close personal relationship with, any HCHA tenant?	Yes	No	
If you have answered yes above, please give name and de	etails belo	OW.	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Employment status			
Are you a national of one of the European Economic Area	Yes	No	
countries who is able to work without a visa in the UK?			
	•		
If no, do you have a visa allowing you the unrestricted righ	t Yes	No	
to work in the UK? **			
	tion mulau t		-1
** Please note we will need to see originals of any relevant documenta	ition prior to	o appointmei	π.
Have you completed and signed the mandatory Disclosure	Yes	No	
, , ,	165	INO	
Attachment Form included with this application?			
I declare that to the best of my knowledge the information			and
any mandatory accompanying documentation, is true and	correct a	nd can be	
treated as part of any subsequent contract of employment.	. I unders	tand that n	ny
application may be rejected and/ or I may be dismissed wi	thout noti	ce followin	g
appointment if I have given false or misleading information			
details.		,	
I give permission for enquiries to be made to confirm quali	fications	experience	
dates of employment and my right to work in the UK and for		•	
, , , , , , , , , , , , , , , , , , , ,		•	ICI
people or organisations of necessary information to verify	me conte	III.	
I confirm understanding that the appointment may be subjection	ect to a sa	atistactory	
medical examination			
Signed Date:			

Please return the completed application form and other relevant documents as per the information in the job advert.

#### **DISCLOSURE ATTACHMENT FORM**

#### **IMPORTANT NOTICES TO APPLICANTS**

- Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act. Therefore, Hull Churches Housing Association is entitled to access relevant information regarding criminal convictions from the Disclosure and Barring Service (DBS). This process is called 'Disclosure'.
- 2. Please complete this form and return it prior to the interview date. This gives us the opportunity to consider any information it contains before the interview.
- 3. Applicants are not entitled to withhold information about convictions unless they are deemed "spent" under the provisions of the Act, and should you be offered employment and it is discovered that you have failed to disclose any relevant convictions then the offer of employment may be withdrawn by the authority. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the order applies. This information will only be seen by Personnel Officers and Counter-Signatories, and not the selection Panel.
- 4. If you are successful, you will be required to fill in a Disclosure Application Form.

#### PLEASE COMPLETE THE FOLLOWING SECTIONS

#### **SECTION 1**

Do you have any unspent convi	ctions, cautions, reprimands, or warnings? No		
•	have any unspent convictions, cautions, reprimands, or warnings? No swer is YES to either, please state nature of offence and the date and place of the on, caution, reprimand, or warning.		
Signature	Date		

#### **SECTION 2**

It is the policy of Hull Churches Housing Association because the nature of the work and the vulnerability of clients that references are sought, and the enquiries made before anyone is appointed to work with children or vulnerable adults.

When enquiries are made it is important that identity is clear and should you have been previously known by any other name (e.g., maiden name, former marriage, change by deed poll etc.) then you are requested to declare this in the space below.

I have previously been known as:					
Signature	Date				

#### **SECTION 3**

Please provide details of any time not accounted for since leaving school. (Include dates, whether in work, unemployed, domestic circumstance, etc.)

#### **SECTION 4**

Note to applicant: Because of the nature of the work you are applying for, references will always be taken from a current employer. One referee on the Application Form should be a current or most recent employer.

References may also be requested from <u>any</u> previous employer.

I declare that the information given on this form is to the best of my knowledge true and complete. I understand that Hull Churches Housing Association can verify this information and failure to disclose relevant information may lead to any offer of employment been withdrawn.

Name:		
Post Title:		
Signature:		
Date:		

# Hull Churches Housing Association **Equal Opportunities Monitoring Information**

Hull Churches Housing Association aims to ensure that no job applicant or employee receives less favourable treatment or is disadvantaged by any conditions or requirements that cannot be shown as justifiable. In order to assist us in checking that this policy is carried out – and for that purpose only – it would help if you could complete the following.

You are under no obligation to complete this section and it will not affect your application in any way. This monitoring information will be separated from your application form as soon as received and will not be passed to anyone involved in short listing, interviewing or appointment. (See note in Section 3.)

1. I would describe my ethnic group as: (tick most appropriate box and one box only)							
A White	B Mixed		С	Asian or Asian British			
British Irish Other (specify below)	White & Black Caribbean White & Black African White & Asian Other (specify below)			Indian Pakistani Bangladeshi Other (specify below)			
D Black/Black British	E Chinese		F	Other			
Caribbean African Other (specify below)	Chinese Other (specif	y below)		Any other (specify below)			
2. I would consider my religion or belief as: (tick most appropriate box and one box only)							
Buddhist Christian Hindu Jewish		Muslim Sikh Other(please	specify	Prefer not to say			
3. Do you consider you have a	disability?	Yes	No				
If yes, please list any special requirements if asked to attend for interview?  To make these arrangements we may need to give details of your disability to the panel. Please indicate your permission for us to do so by ticking the box opposite.							
4. My gender is:		Male		Female			
5. I consider my sexual orientation to be:		Heterose Bisexual	xual	Gay/Lesbian Prefer not to say			
6. Age last birthday:							