Application Form

1. Please complete all pages
2. Please complete legibly in black ink if completing by hand
3. This form is electronically formatted and can be completed in microsoft word
4. If completing electronically we will ask you to sign the form at interview
5. Please note the personal details, references and convictions sections of the form are removed for the shortlisting process.
6. Any criminal conviction information disclosed will be treated sensitively and in confidence and will only be used in deciding a candidate’s suitability for the post.
7. If you need to attach additional sheets please number and reference them clearly
8. Please return your completed application to: maya@bradfordcpa.co.uk or return to the address below with your completed Equal Opportunities Form.

Maya Lad

Bradford Community Payroll

19-25 Sunbridge Road

Bradford

BD1 2AY

|  |  |  |  |
| --- | --- | --- | --- |
| Post applied for:  |       | Hours per week |       |
| Name: |       |
| Address: |       |
| Post code: |       |
| Email: |       |
| Tel home: |       | May we call you on this number? Yes [ ] , No [ ]  |
| Tel Mobile: |       | May we call you on this number? Yes [ ] , No [ ]  |
| Tel Work: |       | May we call you on this number? Yes [ ] , No [ ]  |
| Are you entitled to work in the UK? Yes [ ] , No [ ]  |
| References: |
| Please provide the details of two referees who can comment on your suitability for the post. One should be your current or most recent employer if you have one. If you have not been previously employed give the name of a responsible person who knows you well but is not a relative.  |
| Reference 1:  |
| Name: |       |
| Position:  |       |
| Address: |       |
| Post code: |       |
| Tel: |       |
| Email:  |       |
| In what capacity have you known this person and for how long?       |
| May we ask them for a reference prior to interview? Yes [ ] , No [ ]   |
| Reference 2:  |
| Name: |       |
| Position: |       |
| Address: |       |
| Post code: |       |
| Tel: |       |
| Email:  |       |
| In what capacity have you known this person and for how long?       |
| May we ask them for a reference prior to interview? Yes [ ] , No [ ]   |
| Criminal Convictions: |
| Have you ever been convicted or cautioned in relation to a criminal offence, have you been bound-over, or subject to formal warnings or are you at present the subject of any criminal proceedings or police investigation? Yes [ ] , No [ ]  |
| Please specify dates of summons, charges, cautions, reprimands, final warnings or convictions, court, nature of offence and sentence or order imposed.      |
| Education |
| Please provide details of your education from high/secondary school starting with the most recent: |
| Name of establishment | Dates attended from/to  | Subjects studied /qualifications gained |
|       |       |       |
| Training and professional development: |
| Please provide details of training you have undertaken starting with the most recent: |
| Provider | Course length  | Subjects studied / Qualifications gained |
|       |       |       |
| Employment Experience |
| Please provide details of your employment history starting with the most recent (please list volunteering experience in the next section). |
| Name of organisation | Dates from/to  | Post held and brief description of responsibilities | Reasons for leaving |
|       |       |       |       |
|       |       |       |       |
| Please state earliest date you would be able to commence employment with us.      |

|  |
| --- |
| Community and voluntary work experience |
| Please tell us about any voluntary work experience you have gained or about your involvement in community and voluntary groups which is not included above.  |
| Dates from / to | Name of organisation | Details of your work /activities |
|       |       |       |
| Supporting Statement |
| Please tell us how you meet the requirements of the person specification. We require a minimum of two pages and you cannot exceed three.      |
|       |
|       |
| NB. If you are applying electronically please leave this blank. You will be asked to sign the application at the interview stage if you are successful in progressing.Declaration: I declare that the information given on this form is true and correct to the best of my knowledge and belief. Signature:       Date:       |

**Equal Opportunities Monitoring Form**

Bradford Community Payrollwants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary.

**Gender**

Man 🗆 Woman 🗆 Intersex 🗆 Non-binary 🗆 Prefer not to say 🗆 If you prefer to use your own term, please specify here …………………….

**Are you married or in a civil partnership?**

Yes 🗆 No 🗆 Prefer not to say 🗆

**Age**

16-24🗆 25-29 🗆 30-34 🗆 35-39🗆 40-44 🗆 45-49 🗆 50-54 🗆55-59 🗆 60-64 🗆 65+ 🗆 Prefer not to say 🗆

**What is your ethnicity?**

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box

***White***

English 🗆 Welsh 🗆 Scottish 🗆 Northern Irish 🗆 Irish 🗆

British 🗆 Gypsy or Irish Traveller 🗆 Prefer not to say 🗆

Any other white background, please write in:

***Mixed/multiple ethnic groups***

White and Black Caribbean 🗆 White and Black African 🗆 White and Asian 🗆 Prefer not to say 🗆 Any other mixed background, please write in:

***Asian/Asian British***

Indian 🗆 Pakistani 🗆 Bangladeshi 🗆 Chinese 🗆 Prefer not to say 🗆

Any other Asian background, please write in:

***Black/ African/ Caribbean/ Black British***

African 🗆 Caribbean 🗆 Prefer not to say 🗆

Any other Black/African/Caribbean background, please write in:

***Other ethnic group***

Arab 🗆 Prefer not to say 🗆 Any other ethnic group, please write in:

**Do you consider yourself to have a disability or health condition?**

Yes🗆 No 🗆 Prefer not to say 🗆

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

**What is your sexual orientation?**

Heterosexual 🗆 Gay woman/lesbian 🗆 Gay man 🗆 Bisexual 🗆

Prefer not to say 🗆 If you prefer to use your own term, please specify here ……………………………………………….….

**What is your religion or belief?**

No religion or belief 🗆 Buddhist 🗆 Christian 🗆 Hindu 🗆 Jewish 🗆

Muslim 🗆 Sikh 🗆 Prefer not to say 🗆 If other religion or belief, please write in:

**What is your current working pattern?**

Full-time 🗆 Part-time 🗆 Prefer not to say 🗆

**What is your flexible working arrangement?**

None 🗆 Flexi-time 🗆 Staggered hours 🗆 Term-time hours 🗆

Annualised hours 🗆 Job-share 🗆 Flexible shifts 🗆 Compressed hours 🗆

Homeworking 🗆 Prefer not to say 🗆 If other, please write in:

**Do you have caring responsibilities? If yes, please tick all that apply**

None 🗆 Primary carer of a child/children (under 18) 🗆

Primary carer of disabled child/children 🗆

Primary carer of disabled adult (18 and over) 🗆 Primary carer of older person 🗆

Secondary carer (another person carries out the main caring role) 🗆

Prefer not to say 🗆