



APPLICATION FOR EMPLOYMENT

Please complete clearly **in black ink or type**. Please return the completed application either by email to vivsullivan@dandeliontime.org.uk or by post to Human Resources, Dandelion Time, Elmscroft House, Charlton Lane, West Farleigh, Maidstone, Kent ME15 0NY. **Please do not send a CV.** Please note that all Dandelion positions are subject to a satisfactory DBS

POSITION APPLIED FOR:	
------------------------------	--

PERSONAL INFORMATION	
Title	
Forename(s)	
Surname	
Address	
Postcode	

Home Telephone Number	
Evening Telephone Number	
Email Address	

Do you hold a current driving license? Yes No

Are you eligible to work in the UK? Yes No

REFEREES

Please name two referees, one of which should be your current or last employer. Employment is subject to satisfactory references. Your current employer will not be approached without your permission.

Name	Name
Address	Address
How is the referee known to you?	How is the referee known to you?
Telephone Number	Telephone Number
Email Address	Email Address

EDUCATION

Secondary School	From/To	Examination and Results

FURTHER EDUCATION

College or University	From/To	Courses and Results

PROFESSIONAL MEMBERSHIPS AND QUALIFICATIONS

--

TRAINING AND PERSONAL SKILLS
Please indicate skills and training courses undertaken relevant to this appointment.

--

EMPLOYMENT HISTORY

Begin with present occupation/last employer and work backwards. Please use an additional sheet if required.

From/To	Employer, Type of Business	Position held, responsibilities and reason for leaving

PERSONAL STATEMENT

Please give details of why you are interested in this post and what you could contribute to it. Please give any other information about yourself that you feel may be relevant to the post you are applying for. Please use an additional sheet if necessary.

Do you have any unspent convictions under the terms of the Rehabilitation of Offenders Act 1974?
If yes, please give details:

Yes

No

DECLARATION

I confirm that all the above information is correct. I understand that if I have withheld or mis-stated any information, it may result in the refusal or termination of employment. I also understand that any written offer of employment is subject to satisfactory references.

Signed:

Date:

DATA PROTECTION

I understand that the information provided by me on this form as an applicant will be stored either on paper records or a computer system in accordance with the Data Protection Act 1998 and will be processed solely in connection with recruitment.

Signed:

Date:

EQUAL OPPORTUNITIES MONITORING FORM

Dandelion Time endeavours to be an equal opportunities employer. In declaring a commitment to the promotion of equality of opportunity, the Trust welcomes applications from all sections of the community irrespective of gender, marital status, sexual orientation, disability, race, colour, ethnic or racial origin, and nationality.

In order to assist us in monitoring equal opportunities, please complete this form by placing a tick in the appropriate box within each category. The provision of this information is entirely voluntary and, although it would be helpful for monitoring purposes, if you do not wish to complete any section, please leave it blank.

All responses will be treated in the strictest confidence, and used solely for statistical purposes. This monitoring form will be detached from the application form **prior** to short listing. Certain information provided by you on this form will constitute sensitive personal data under the Data Protection Act 1998. By providing us with this information, you will be deemed to have explicitly consented to us using such information for the purposes identified on this form.

POST APPLIED FOR

--

WHERE DID YOU HEAR OF THIS POST?

--

GENDER

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>

AGE

16 – 20	<input type="checkbox"/>	21 – 30	<input type="checkbox"/>	31 – 40	<input type="checkbox"/>
41 – 50	<input type="checkbox"/>	51 – 60	<input type="checkbox"/>	61 – 65	<input type="checkbox"/>

MARITAL STATUS

Single	<input type="checkbox"/>	Married	<input type="checkbox"/>	Widowed	<input type="checkbox"/>
Separated	<input type="checkbox"/>	Divorced	<input type="checkbox"/>		

DISABILITY

Under the definition in the 1995 Disability Discrimination Act do you consider yourself to be disabled

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

ETHNIC GROUP

Which ethnic group would you say you belong to? Please tick the appropriate box to indicate your ethnic background.

<i>White</i>	British	<input type="checkbox"/>	<i>Black or Black British</i>	Caribbean	<input type="checkbox"/>
	Irish	<input type="checkbox"/>		African	<input type="checkbox"/>
	Other white background	<input type="checkbox"/>		Other black background	<input type="checkbox"/>
<i>Mixed</i>	White & Black Caribbean	<input type="checkbox"/>	<i>Asian or Asian British</i>	Indian	<input type="checkbox"/>
	White & Black African	<input type="checkbox"/>		Pakistani	<input type="checkbox"/>
	White & Asian	<input type="checkbox"/>		Bangladeshi	<input type="checkbox"/>
	Other mixed background	<input type="checkbox"/>		Other Asian background	<input type="checkbox"/>
<i>Chinese</i>		<input type="checkbox"/>	<i>Other ethnic group</i>		<input type="checkbox"/>