



JOB APPLICATION FORM

Please note – this application form will be used by both Carlisle Youth Zone and The Rock Youth Project for the purpose of undertaking recruitment and selection for this role. This form and the information contained within this form will be held within the guidelines of both organisations Privacy Policy, Data Protection Policy and in line with our Data Retention guidelines.

Please complete this form electronically or in black ink

PART A: PERSONAL INFORMATION

Position applied for	Youth Worker (Detached Youth Work Programme)
Please state which organisation in the partnership you are wanting to be considered for employment by	Carlisle Youth Zone <input type="checkbox"/> The Rock Youth Project <input type="checkbox"/> Both / Either <input type="checkbox"/>

Family name		Title:	
Forename(s) in full			
Preferred name (if different)			
Have you been known by a different name or changed your name by Deed Poll? <i>If yes, please provide details</i>			
Address (including postcode)			
Phone (for us to contact you)			
Email			
Are you eligible to work in the UK?			
National Insurance number			

PART B: ABOUT YOU

Please summarise in no more than 120 words, why you believe you are suited to this position. (You will be able to expand on your experience, competencies and qualifications in Parts C, D and E.)

PART C: EDUCATION & TRAINING

Based on the Person Specification, list education, work related training, any relevant professional qualifications and membership of professional organisations.

Date	Subject	Awarding Body	Qualification/Grade

Please continue on an additional sheet if necessary (or extend table)

PART D: EMPLOYMENT HISTORY

Starting with your current/most recent employment.

Dates Start & Finish	Employer Name & Address	Job Title, Main Responsibilities Major Achievements	Final Salary, Reason for Leaving

Please continue on an additional sheet if necessary (or extend table)

PART E: INFORMATION TO SUPPORT YOUR APPLICATION

Looking at the Person Specification, please tell us why you think you are suitable for this job, including any personal attributes, skills and relevant experience. Please also give us examples of how you meet the criteria. Examples can be taken from work, volunteering, extra-curricular activities etc.

Please continue on an additional sheet (or extend box)

PART F: REFERENCES

Please give the names and addresses of two people whom we may contact for a reference, although Carlisle Youth Zone / The Rock Youth Project reserves the right to contact any of your former employers. References given should cover the last 5 years of your employment. The first of your references must be your present employer. If you are unemployed, this should be your last employer. Or if this is your first job, your headteacher or college tutor.

	CURRENT EMPLOYER	SECOND REFERENCE
Name		
Job title		
Organisation		
Address		
Phone		
Email		

How do you know your second referee?	
Can we take up your references before interview?	

PART G: DECLARATIONS

Please tick this box to agree to Carlisle Youth Zone and The Rock Youth Project holding this sensitive personal information on you detailed below. Please note – this form and the information contained within this form will be held within the guidelines of our respective Privacy Policy, Data Protection Policy and in line with our Data Retention guidelines.

<p>REHABILITATION OF OFFENDERS ACT 1974 <i>Owing to the nature of the work, the role is exempt from the previous provisions of the above Act. Therefore applicants are not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provisions of the Act. Carlisle Youth Zone and The Rock Youth Project have the facility to check for convictions.</i></p>	
Have you at any time been convicted of a criminal offence?	
If ‘Yes’, please give details in strict confidence	
Are you on List 99, disqualified from working with children or subject to sanctions?	

Do you hold a current full driving licence?	
For how long have you held this licence?	
Please give details of current endorsements or driving convictions:	

To the best of my knowledge I declare that the information contained in this application form is accurate and correct.

I understand and agree that:

- a) The provision of false information may result in disqualification from the recruitment process or termination of employment.
- b) The information provided on this application may be stored and processed by Carlisle Youth Zone and The Rock Youth Project for a period of 6 months for recruitment purposes and if successful the information will be stored on personal file and processed for the purpose of the employment relationship.
- c) Where I cannot provide evidence of qualifications and / or suitable references the offer of employment may be rescinded and / or employment terminated.
- d) Under the Rehabilitation of Offenders Act (if it applies to the post for which I am applying) failure to disclose any convictions spent or otherwise will result in non-appointment or disciplinary action and potential dismissal.
- e) Where the post for which I am applying requires me to work with children and / or vulnerable adults I hereby agree to a disclosure being made by the Disclosure and Barring Service about the existence and content of a criminal record spent or otherwise.
- f) Should I be short-listed I will be required to provide documentary evidence of my right to live and work in the United Kingdom (see guidance notes).

Signed: _____ Date: _____

If you are sending this form electronically you will be asked to sign it if you are invited for interview. Please return this form by email to: personnel@carlisleyouthzone.org

or by post to: Personnel, Carlisle Youth Zone, Victoria Place, Carlisle. CA1 1LR Tel: 01228 516280

Please note – if you have not heard from us within 4 weeks please presume your application has been unsuccessful on this occasion.

How did you find out about this position?	
If appointed, how soon could you join us?	

EQUAL OPPORTUNITIES MONITORING FORM

Please tick this box to agree to CYZ to hold this sensitive personal information on you detailed below. Please note – this form and the information contained within this form will be held within the guidelines of our Privacy Policy, Data Protection Policy and in line with our Data Retention guidelines.

Carlisle Youth Zone, as an equal opportunities employer intends that no applicant or employee shall receive less favourable treatment on the grounds of sex, marital status, race, colour, nationality, ethnic or national origin, disability, age, religion or sexual orientation or be disadvantaged by condition or requirements which cannot be shown to be justifiable.

In order to ensure the effectiveness of the above, in relation to the recruitment and selection of staff, all applicants are requested to complete this form. Only by collecting this information can we progressively assess its performance against the aims and identify areas where improvements should be made.

This information will not be circulated to the selection panel, but will form part of the personal confidential record of the successful applicant. This form when completed should be returned with the Application Form.

Gender Male Female **Marital Status** Single Married Divorced Widowed

Date of Birth	D	M	Y	Age 16-19	20-29	30-39	40-49	50-59	60-65	Over 65

Ethnic Origins

I would describe my ethnic origin as:

- Asian or Asian British – Bangladeshi
- Black or Black British – African
- Mixed – White and Black African
- Mixed – White and Asian
- White Irish
- Asian or Asian British – Indian
- Black or Black British – Caribbean
- Mixed – White and Black Caribbean
- Mixed – any other Black background
- White - any other background
- Asian or Asian British Pakistani
- Black or Black British *
- Asian or Asian British *
- White British
- Chinese
- Other

These descriptions reflect the ethnicity categories used in the National Census

- Any other Black Background

Disability

Do you consider yourself to have a disability?

Yes

No

The Disability Discriminations Act 1995 defines a disabled person as ‘a person with a physical or mental impairment which has a substantial long-term effect on day-day activities’.

Please identify any access needs below:

Please give details of any special facilities or practical arrangements we can make to help you throughout the recruitment process, eg; we would organise a sign language interpreter, or large print computer software (please contact our personnel team to discuss your requirements):

Please also give details of any adjustments that may be required to the workplace or duties and equipment that will help you perform the role: