|  |  |
| --- | --- |
| Jersey Cares - Application Form | |
| Post Applied for |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Closing Date (if applicable) |  | **Interview Date**  (HR completion) |  |

|  |
| --- |
| Personal Information |

Details entered on this part of the form, ‘Personal Information’, will be held by HR.

|  |  |  |  |
| --- | --- | --- | --- |
| First Name |  | **Surname/Family Name** |  |
|  |  |

|  |  |
| --- | --- |
| Address |  |
|  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Town/City |  | **Country** |  |

|  |  |
| --- | --- |
| Postcode |  |

|  |  |
| --- | --- |
| **Home telephone** |  |
| **Work telephone** |  |
| **Preferred telephone to be contacted on** |  |
| **Email address** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Driving Licence – if relevant to post applied for**  Do you hold a full, clean driving licence valid in Jersey? *(please place an X in the correct box)* | Yes |  | No |  |

|  |  |
| --- | --- |
| **Residential Status**  Please tell us about your residential status. For further information, please visit [www.gov.je/registrationcards](http://www.gov.je/registrationcards) *(please place an X in the correct box)* | |
| **Entitled (someone who has lived in Jersey for 10 years)** |  |
| **Licenced (someone who is an ‘essential employee’)** |  |
| **Entitled to Work (someone living in Jersey for the last 5 years or married to an Entitled, Licensed or Entitled to Work person)** |  |
| **Registered (someone who doesn’t qualify under the above categories)** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  | | --- | | **Safeguarding** |   **This section of the application form will only be viewed by those who need to see it as part of the recruitment process. Any information disclosed will be treated as strictly confidential.**  To protect certain groups of the community and where the role involves a position of trust and tasks performed defined as ‘regulated an Enhanced Disclosure and Barring Service (DBS) Check is required. The DBS Check helps employers make safer recruitment decisions and prevent unsuitable people working with vulnerable groups, including children.  For further information on DBS and the definition of ‘regulated activity’, please refer to:  <https://www.gov.uk/government/organisations/disclosure-and-barring-service/about>  A number of positions and professions are exempt from the Rehabilitation of Offenders (Jersey) Law 2001, Therefore, under the associated Exceptions Regulations of 2002, which includes employment within positions of trust, the potential new employer, Jersey Cares, is entitled under this legislation to ask applicants for details of ‘spent’ and ‘unspent’ convictions. If you have criminal convictions, read the criminal conviction filtering guidance before answering the questions on safeguarding in this section of the Application Form:  <https://www.gov.uk/government/collections/dbs-filtering-guidance>  Jersey Cares aims to promote equality of opportunity and is committed to treating all applicants for positions fairly and on merit. Jersey Cares undertakes not to discriminate unfairly against applicants because of a criminal conviction or other information declared whereby management do not believe the declared information involves a risk to staff or its service users that is relevant to the position being applied for. Answering ‘yes’ to the question(s) below will not necessarily bar an applicant from appointment. This will depend on the relevance of the information provided in respect of the nature of the position for which you are applying and the particular circumstances.  In your application for the role, you will be required to confirm, by signing the declaration at the end of this application, that you are not excluded from working with children or other vulnerable people in a position of trust. In addition, you accept that Jersey Cares is required to complete a DBS Check on you.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Are you currently bound over or do you have any current ‘unspent’ convictions or cautions (including reprimands or warnings) that have been issued in Jersey, the United Kingdom or other country? *(please place an X in the correct box)* | Yes |  | No |  |  |  | | --- | | If yes, please give details / dates of offence(s) and sentence: | |  |  |  | | --- | | **Safeguarding cont.** |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Are there any criminal or other investigation cases pending against you?** *(please place an X in the correct box)* | Yes |  | No |  | | If yes, please give details: | | | | | | |  | | | | | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Do you have any ‘spent’ convictions? Reminder: refer to:**  [**www.gov.uk/government/collections/dbs-filterning-guidance**](http://www.gov.uk/government/collections/dbs-filterning-guidance)  *(please place an X in the correct box)*  **If yes, please give details** | Yes |  | No |  | | |  | | |  |  |  |
| Employment History | | | |
| **Please record below the details of employment history of the past 10 years, beginning with your current or most recent first.**  **Months since most recent employment ended (if applicable)**   |  | | --- | |  | | | | |

**Current/most recent employer (reference always required)**

|  |  |
| --- | --- |
| Employer Name |  |

|  |  |
| --- | --- |
| Employer Address |  |
|  |
|  |

|  |  |
| --- | --- |
| Type of Business |  |

|  |  |
| --- | --- |
| Reporting to (job title) |  |

|  |  |
| --- | --- |
| Your Job Title |  |

|  |  |
| --- | --- |
| Department/Section |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Start Date |  | **End date** |  |

|  |  |
| --- | --- |
| Grade/Salary |  |

|  |  |  |
| --- | --- | --- |
| Period of Notice |  |  |

|  |  |
| --- | --- |
| Duties/Responsibilities |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
| Reason for leaving  (if applicable) |  |
|  |
|  |
|  |
|  |

|  |
| --- |
| Previous Employment |

**Do you have gaps of more than four weeks in your employment history?** *(please place an X in the correct box)*

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

If you have answered ‘yes’ above, please state the reason(s) for the gaps

|  |  |
| --- | --- |
|  |  |
|  |

|  |  |
| --- | --- |
| Name of Employer |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address |  | | |
|  |
|  |  | Postcode |  |

|  |  |
| --- | --- |
| Job title |  |

|  |  |
| --- | --- |
| Duties/Responsibilities |  |
|  |
|  |
|  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Start Date |  | **End Date** |  |
| **Reason for Leaving:** |  | | | |
|  | | | | |
| Name of Employer |  | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Address |  | | |
|  |
|  |  | Postcode |  |

|  |  |
| --- | --- |
| Job Title |  |

|  |  |
| --- | --- |
| Duties/Responsibilities |  |
|  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Start Date |  | **End Date** |  |

|  |  |
| --- | --- |
| **Reason for Leaving:** |  |
|  | |
| Name of Employer |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address |  | | |
|  |
|  |  | Postcode |  |

|  |  |
| --- | --- |
| Job Title |  |

|  |  |
| --- | --- |
| Duties/Responsibilities |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Start Date |  | **End Date** |  |

|  |  |
| --- | --- |
| **Reason for Leaving:** |  |
|  | |
| Name of Employer |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address |  | | |
|  |
|  |  | Postcode |  |

|  |  |
| --- | --- |
| Job Title |  |

|  |  |
| --- | --- |
| Duties/Responsibilities |  |
|  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Start Date |  | **End Date** |  |

|  |  |
| --- | --- |
| **Reason for Leaving:** |  |
|  | |
| Name of Employer |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address |  | | |
|  |
|  |  | Postcode |  |

|  |  |
| --- | --- |
| Job Title |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Duties/Responsibilities |  | | | |
|  |
|  |
|  |
| Start Date |  | **End Date** |  |

|  |  |
| --- | --- |
| **Reason for Leaving:** |  |

|  |
| --- |
| Education and Professional Qualifications |
| Please list all relevant qualifications; please also indicate subjects / qualifications currently being studied. Qualifications disclosed maybe subject to a satisfactory check. |

|  |  |
| --- | --- |
| **Subject/Qualification** | **Grade/Result** |
|  |  |

|  |
| --- |
| Membership of Professional Bodies |
| Please give details regarding any relevant professional registrations or memberships. This information may be subject to a satisfactory check. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Awarding Professional Body** | | **Current Registration Status** | | |
|  | |  | | |
| Continue on a separate sheet if necessary | | | | |
|  | | | | |
| Relevant Training Courses Attended | | | |
| Please provide details regarding relevant training courses that you have attended or currently undertaking together with the date completed or to be completed by. | | | |
| **Course title** | **Training Provider** | | **Duration and Year Completed** |
|  |  | |  |
| Continue on a separate sheet if necessary | | | |

|  |
| --- |
| Personal Statement |
| **In this section, please include your reasons for applying and take the opportunity to highlight your particular talents and strengths, along with what you feel you can personally offer to the role. Please make reference to the transferable skills for advocacy detailed** [**here**](http://advocacytraining.org.uk/i-become-advocate/)**:** |
|  |
| Continue on a separate sheet if necessary |

|  |
| --- |
| **Declaration** |

I hereby declare that the information I have provided in this application form is true and complete to the best of my belief. I agree that any deliberate omission of relevant information, falsification or misrepresentation in the application form may be grounds for rejecting the application or dismissal if employed/engaged by Jersey Cares. I understand and consent that Jersey Cares can make enquires to verify these details.

In addition, I am aware and accept that due to the nature of the position I have applied for, I may be subject to an Enhanced Disclosure Barring Service (DBS) Check; as per the information contained within the section headed ‘Safeguarding’. I further confirm that I am not excluded from working with children or other vulnerable people. In completing the section headed ‘References’, I have provided written and signed consent for Jersey Cares to contact the individuals listed should an offer of employment/engagement be made and accepted.

Please note that forms completed without a signature will automatically be rejected.

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
| Signed: |  | **Date:** |  |
|  |

|  |  |
| --- | --- |
| Jersey Cares will adhere to the Data Protection (Jersey) Law 2018 in relation to the information you have provided. | |
| **Returning this form** | |
| By email: info@jerseycares.je |  |
|  |  |