



Job application form

PERSONAL DETAILS

First name:

Surname:

Address:

Contact telephone numbers:

Email:

Job applied for:

Where did you hear about the role?

For HR use only

Applicant reference number:

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CURRENT OR MOST RECENT EMPLOYMENT/VOLUNTARY WORK

Job title:

Salary:

Name and address of employer:

Telephone:

Employed from/to:

Notice period (if applicable):

Reason for leaving:

Brief description of duties/responsibilities:



EMPLOYMENT HISTORY – please continue on a separate sheet if necessary

Name of employer and type of business including full address and telephone number:

Position held, duties and responsibilities:

Reason for leaving:

Dates from/to:

Name of employer and type of business including full address and telephone number:

Position held, duties and responsibilities:

Reason for leaving:

Dates from/to:



EDUCATION – please continue on a separate sheet if necessary

General/Secondary education/Higher

Subject:	Level:	Grade:	Year obtained:

MEMBER OF PROFESSIONAL BODIES/RELEVANT TRAINING AND DATES

Institution/Society:	Date membership obtained:	Grade:

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PERSONAL STATEMENT – please continue on a separate sheet if necessary

Please describe why you are interested in this job and how your skills, knowledge and experience are relevant. Please make sure you provide specific examples:



REFERENCES

Please provide two references, one of which must be from your current or most recent employer. Referees should not be friends, relatives or immediate colleagues. If this is your first employment, one reference must be from your head teacher or lecturer. All appointments are subject to receiving satisfactory references. We reserve the right to take up references from any previous employer.

First referee:	Second referee:
Job title:	Job title:
Work address:	Work address:
Tel:	Tel:
Email:	Email:
How do you know this person:	How do you know this person:

GENERAL INFORMATION

Please state any dates that you will not be available for interview:

Were you referred by a Red Kite employee? If YES please give details: Yes No

As far as you are aware, are you related to, live with or have a relationship with any of our current employees, tenants, leaseholders or Board members? If yes, please give details: Yes No

Do you require a work permit? Yes No

Do you hold one of the following? Please note you will need to provide one or more of the relevant documents before starting employment.

Birth certificate Passport Work permit Travel document Driving Licence

REHABILITATION OF OFFENDERS ACT

Do you have any criminal convictions, cautions, reprimands or final warnings? Yes No

If you have answered 'Yes' please give details including dates and sentences, if applicable. You only need to declare spent convictions or cautions if you are applying for a post involving the direct provision or management of services to our vulnerable clients. (If you wish, you can tick 'Yes' above and send the details requested below in a Private & Confidential email directly to hr@redkitehousing.org.uk If you do this, indicate below that you have sent details directly to HR).

DECLARATION

The details given on this application are true and accurate. I understand that my application may be rejected for withholding relevant details or giving false, misleading or inaccurate information. In addition, I may also be subject to disciplinary proceedings which could amount to my dismissal, and/or action being taken against me in the civil and criminal courts for offences identified under the Fraud Act 2006. By signing and returning this application form, I consent to the employer using and keeping information about me provided by me or by third parties such as referees relating to my application or future employment. Such information includes details relating to my health and to any criminal record. N.B. If you are emailing this form to us, please type your initials below.

Sign and date:



Equal opportunities monitoring form

For HR use only

Applicant reference number:

Job applied for:

Red Kite Community Housing is committed to developing positive policies to promote equal opportunities in employment to make sure all applicants are treated equally regardless of gender, race, ethnic origin, culture, disability or sexuality. All information provided on this form will be treated in the strictest confidence. So that we can monitor the effectiveness of this policy please can you complete the following information:

I am: Male Female

Date of birth (dd/mm/yy):

I consider myself to be:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> White British | <input type="checkbox"/> White Irish | <input type="checkbox"/> White Other | <input type="checkbox"/> Mixed White and Asian |
| <input type="checkbox"/> Mixed White and Black Caribbean | <input type="checkbox"/> Mixed White and Black African | <input type="checkbox"/> Mixed Other | <input type="checkbox"/> Asian-British/Indian |
| <input type="checkbox"/> Asian-British/Pakistani | <input type="checkbox"/> Asian-British/Bangladeshi | <input type="checkbox"/> Asian-British/Other | <input type="checkbox"/> Black-British/Caribbean |
| <input type="checkbox"/> Black-British/African | <input type="checkbox"/> Black-British/Other | <input type="checkbox"/> Chinese/Other | <input type="checkbox"/> Would rather not say |

I consider my religion to be:

- | | | | |
|---|--|---------------------------------------|---|
| <input type="checkbox"/> Baha'i | <input type="checkbox"/> Buddhism | <input type="checkbox"/> Christianity | <input type="checkbox"/> Hinduism |
| <input type="checkbox"/> Islam (Muslim) | <input type="checkbox"/> Jainism | <input type="checkbox"/> Judaism | <input type="checkbox"/> Rastafarianism |
| <input type="checkbox"/> Sikhism | <input type="checkbox"/> Zoroastrianism (parsis) | <input type="checkbox"/> No religion | <input type="checkbox"/> Would rather not say |
| <input type="checkbox"/> Other (please state) | | | |

I consider my sexual orientation to be:

- | | | | |
|---|------------------------------|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Heterosexual | <input type="checkbox"/> Gay | <input type="checkbox"/> Bisexual | <input type="checkbox"/> Lesbian |
| <input type="checkbox"/> Would rather not say | | | |

Do you have any medical condition or disability that you believe we should be aware of?

a) In relation to adjustments you may need us to make to enable you to participate in the recruitment process (interviews and tests?)

- Yes No (if yes, please give details)

(b) In relation to your employment and for which you may require support, modifications, adjustments, or special equipment to assist you in carrying out the duties of this post?

- Yes No (if yes, please give details)

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