

HEADWAY OXFORDSHIRE

APPLICATION FORM - Please print or type in black ink



Once completed please return to:
Charlotte Carlisle
Headway Oxfordshire
4 Bagley Wood Road
Kennington
OXON, OX1 5PL

1. Details of Position applied for:

Application for:

2. Personal Details

Title (Mr/Mrs/Miss/Ms/Dr):

Surname:

First Name(s):

Address:

Postcode:

Home telephone number:

Mobile telephone number:

Email address:

Do you require a work permit to do this job under the terms of the Immigration and Asylum Act 1996?

Yes/No

Do you have a full current driving license?

Yes/No

Do you have regular use of a car?

Yes/No

3. History of Employment

Present or most recent employment:

Job title and brief description of duties:

Salary:

Grade:

Start date:

Date left (if applicable):

Reasons for wishing to leave:

When could you commence employment with us:

Employer's Name and Address:

Employer's Business:

Previous employment over the last ten years (most recent first – including any voluntary work. Please use continuation sheet if necessary and ensure all periods are accounted for).

From	To	Employers name and address	Position held	Reason for leaving

4. Education and Training

Schools (secondary)	Date from	Date to	Examinations taken	Grade/Level	Date(s)
Further Education College/University	Date from	Date to	Courses taken	Grade/Level	Date(s)

Additional/professional qualification(s)/membership(s) obtained		
Professional Registration No: (PIN etc). Include expiry date		
Details of courses attended – Managerial, professional etc.		
Course/Subject Title	Organised by	Date(s)

5. References		
Please give the contact details of TWO persons (who should not be related to you) who have consented to act as a referee. One must be your present employer (if currently unemployed, your last employer). If you have just completed full-time education, the Head/Principle and/or Tutor should be given.		
1.		
Name:		
Address:		
Post code:		
Telephone:		
Email:		
Please state the capacity in which the referee knows you:		
Can this referee be approached prior to interview?	Yes	No
2.		
Name:		
Address:		
Post code:		
Telephone:		
Email:		
Please state the capacity in which the referee knows you:		

Can this referee be approached prior to interview?	Yes	No
6. Supporting Information		
Please give briefly any additional information you consider important (including detail of previous position, relevant experience and why you think you should be considered for the post) and special interests or activities, referring especially to the Personal Specification.		

If necessary please continue on separate sheet(s). (Please state how many pages are attached).

7. Disclosure of Information

Give details of any relationship or connection to a person who is either an employee of Headway Oxfordshire or to a person who is a service user of Headway Oxfordshire.

Rehabilitation of Offenders Act 1974

The position for which you are applying is exempt from the provision of Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. Applicants should be assured that the information they give will be kept confidential. The *Data Protection Act* requires that personal information is obtained and processed fairly and lawfully; is only disclosed in appropriate circumstances; is accurate, relevant and not held longer than necessary; and is kept securely. Only relevant convictions and other information will be taken into account so disclosure need not necessarily be a bar to obtaining this position.

Have you ever been convicted or cautioned of a criminal offence? Yes/No

Are you aware of any police enquiries undertaken following allegations made against you, which may have a bearing on your suitability for this post? Yes/No

If yes please give details of offence(s) and sentence on a separate sheet, enclosed in an envelope marked 'Confidential' and addressed to 'The Chief Executive'.

The job may require the transportation of service users in either one of our vehicles (must be able to drive a manual geared vehicle) or your own car. Do you have access to a vehicle and have a full, clean driving license?

Yes/ No

You will be required to provide a copy of your car insurance stating that you are covered for business

Do you have any condition which may affect your ability to perform your duties?

Yes/ No

If so, what adjustments can you suggest we might make?

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DECLARATION

I confirm that the information I have given on this form is correct and complete, and that misleading statements may be sufficient for cancelling any agreement made. I understand that, in the event of being shortlisted for interview, I will be required to complete a confidential health check declaration in respect of my state of health. Because of the sensitive nature of the duties the postholder will be expected to undertake, I also understand that the declaration will include details of any criminal convictions, cautions, reprimands and final warnings *and any other information that may have a bearing on my suitability for the post*. I understand that an enhanced disclosure will be sought in the event of a successful application.

Signature _____ Date _____