

CONFIDENTIAL APPLICATION FORM

May we telephone you at work? YES/NO

(Office ref:

Please complete this form as clearly as possible and return it to the address shown below. **Do not attach CVs or other papers – use this form only.** The completed application should not exceed 10 sides of A4 pages.

(please complete in black ink and should be typed in a font size no smaller than 10pt) Closing date and time for applications is _Thursday 20 April 2017, 16:00 pm

Application for the post of: (please specify)	Please return form to: NICRAS 143a University Street Belfast BT7 1HP
1. PERSONAL INFORMATION	
Last name:	Forename (s):
Home address including postcode:	Home Telephone No: Work Telephone No:

2. QUALIFICATIONS AND TRAINING

Please list below all the qualifications you have or training courses you have attended, which are relevant to this post. **.** Please do not record names of any schools attended.

E-mail Address:

relevant to this post Please do not record names of any schools attended.				
Type of educational institution (e.g.	Title of qualification and level achieved	Dates between which the		
school, further education college,		qualification was		
university, professional body, etc)		undertaken		

3. WORK EXPERIENCE				
Note: Please give details of all posts you have held, starting with your current or most recent				
post.				
From	То	Employer's name & address and nature of business	Job title and brief description of duties. Please indicate reasons for leaving.	Salary
		business	for leaving.	

Please given details of any additional qualitications, or membership of professional bodies or any othe training undertaken which you feel may be relevant:

4. DESCRIBE HOW YOU MEET THE REQUIREMENTS OF THE ROLE

The person specification higlights essential skills, abilities, knowledge and qualifications required to carryout this post. Please highlight how you meet these criteria drawing upon all your experience whether in paid work or in a voluntary capacity. Please given practical examples where possible to evidence your ability to meet the criteria for the role. This information will be used for the shortlisting process.

Essential Criteria (please refer to the person specifications for this post) Essential Criteria 1

Essential Criteria 2

Essential Criteria 3

Essential Criteria 4 Essential Criteria 5
Essential Criteria 5
Essential Criteria 6
Essential Criteria 7

Desirable Criteria (please refer to the person specifications for this post) Desirable Criteria 1

Desirable Criteria 2		
Desirable Criteria 3		
Desirable Citteria 5		
Desirable Criteria 4		
Desirable Criteria 5		
Desirable Citteria 5		

5. REFERENCES		
Please give the names and addresses of two people whom we may contact for a confidential assessment of your suitability for this job. One of these should be your most recent or current employer. The Referees should not be related to the candidate		
NAME, ORGANISATION (IF APPLICABLE) ADDRESS	NAME, ORGANISATION (IF APPLICABLE) ADDRESS	
Telephone:	Telephone:	
Email address:	Email address:	
Relationship to candidate:	Relationship to candidate:	
Can we take up this reference prior to interview? YES/NO	Can we take up this reference prior to interview? YES/NO	
6. GENERAL INFORMATION		
Do you hold a current full driving licence?	YES/NO	
As an Equal Opportunity Employer we wish to ensure that all applicants have the opportunity to perform to the best of their ability in either a test or interview situation. Please let us know if you require any reasonable adjustments, or arrangments to enable you to attend for interview. Adjustments:		
7. SOURCE	8. IF SELECTED?	
Where did you find out about this role?	When could you take up duties?	
9. DISCLOSURE AND CONVICTION		
Please give details of any criminal convictions or cautions you have had which might relate in any way to the post for which you are applying. (Under the terms of the Rehabilitation of Offenders Act 1974, and the Rehabilitation of Offenders Act (Exceptions) Order 1975, and the Rehabilitation of Offenders Act 1974(Exclusions and Exceptions) (Scotland) Order 2003 (as amended); and the Rehabilitation of Offenders (Northern Ireland) Order 1978 and the Rehabilitation of Offenders (Exceptions) Order (Northern Ireland) 1979, you do not have to disclose information about certain convictions depending upon their seriousness and how long ago they were.) Please note: Access NI clearance will be a condition of appointment		
10. ELIGIBILITY TO WORK IN THE UK:		
Are you currently eligible to work in the UK? (please circle as appropriate)	Yes / No	
Please note: you will be required to provide documentation to support this claim (under the Asylum and Immigration Act 1996) if offered the post.		
DECLARATION		

A) I have read and understood the information provided in the Candidate Information Booklet.
B) I undertake to inform the NICRAS in writing of any changes in my circumstances which may occur between the date of my application and any possible date of appointment.
C) The responses detailed in this application form are true and accurate to the best of my knowledge and belief. I understand that if I am found to have suppressed any material fact or to have given false answers I will be liable to disqualification or, if appointed, to dismissal.
D) I confirm I am aged 16 or over.
E) I give my consent for a criminal record check to be carried out as detailed in the 'Vetting' section of the Candidate Information Booklet.

PLEASE RETURN THE COMPLETED FORM TO -

Your form should be received by ______ on the _____

Any forms received after this date and time will not be considered.