

|  |  |
| --- | --- |
| **APPLICATION FORM** | |
| **Closing Date for receipt of completed applications:**  **12noon, Thursday 19th October 2017** | |
| Please complete this form as **accurately and fully** as possible, with reference to the Job Description and Person Specification provided. **Please read the Guidance Notes provided before completing your application. CVs will not be accepted.**  Please ensure sufficient detail is provided to **demonstrate how you meet the eligibility criteria. If the appropriate detail is not provided, e.g. length of experience, dates and examples, your application will not be considered.**  **Do not exceed the space provided on SECTION 6 –** additional pages or supplementary material will not be considered by the selection panel. | |
| **Application for the post of:**  Domestic Assistant- Cramsie Court | **Ref. No. DOM-CRAM-1-17** |

|  |  |
| --- | --- |
| **SECTION 1: PERSONAL DETAILS (Please complete this section in block capitals)** | |
| **Surname/Family Name:** | **Initials:** |
| **Address:** | |
|  | |
|  | **Postcode:** |
| **Telephone No.:** *Home*  *Work* | |
| **Email:** | |
| **May we telephone you at work? YES/NO** | |
| **Do you require a work permit? YES/NO** | |
| **Do you have a full, current driving licence? YES/NO**  *(Will only be considered for relevant posts)* | |
| **Details of endorsement(s):** | |
| **Are you a car owner or do you have access to a vehicle/transport? YES/NO** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SECTION 2: EDUCATION AND TRAINING**  ***List details of relevant qualification in REVERSE order starting with most recent first (i.e. professional qualification, degree, A levels, GCSEs or equivalent, and any other further qualifications). Please clearly demonstrate how you meet the advertised criteria. Only qualifications listed will be taken into account. At offer stage, candidates will be required to provide copies of certificates.***  **You may include an additional sheet for this section, if more space is required.** | | | | |
| **FROM**  **Month Year** | **TO**  **Month Year** | **TYPES OF EDUCATIONAL ESTABLISHMENT** | **TYPE & LEVEL OF EXAMINATIONS/SUBJECT TAKEN** | **GRADE** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **Please give details of any training/relevant courses attended, with dates.** | |
| **COURSE** | **DATES** |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **SECTION 3: VOLUNTARY WORK**  **Please give details of any voluntary work undertaken.** |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
| **SECTION 4: EXPERIENCE**  **Present/most recent employment.** | |
| **NAME & ADREES OF EMPLOYER** | **PLACE OF WORK *(if different)*** |
|  |  |
|  |  |
|  |  |
| **Postcode:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Position held** |  | **Date appointed** |  |
| **Current hours of work** |  |  |  |
| **Current salary**  ***(must be completed)*** |  | **Leaving date**  ***(if applicable)*** |  |
| **Notice period required** |  |  |  |

|  |
| --- |
| **SUMMARY OF MAIN DUTIES AND RESPONSIBILITIES:** |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
| **Reason for leaving/**  **wishing to leave** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Details of Previous Employment. Start with the most recent and work backwards (do not include present/most recent position).**  **You may include an additional sheet for this section, if more space is required.** | | | | |
| **NAME AND ADREES OF EMPLOYER** | **POSITION HELD AND BRIEF DETAILS OF KEY DUTIES** | **APPROX**  **SALARY** | **LENGTH OF SERVICE** | **REASON FOR LEAVING** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **Why are you applying for this post?** |
|  |
|  |
|  |
|  |
|  |
|  |

|  |  |  |
| --- | --- | --- |
| **SECTION 5: GENERAL DETAILS** | | |
| **a) Are you related to any employee or Board member of Clanmil Housing Association Limited?** | | **YES/NO** |
| **If YES, please state who and the relationship:** | | |
|  | | |
| **During clearance we seek references to cover a minimum of 3 years. If your current referees do not cover three years, we will approach past employers to cover at least this period.** | | |
| **b) Referees** | | |
| **1. Present/Most recent Employer**  (not a relative or personal friend) | **2. Another work related, academic or character referee** (not a relative or personal friend) | |
| **Name:** |  | |
| **Position:** |  | |
| **Address:** |  | |
|  |  | |
|  |  | |
|  |  | |
| **Telephone No.:** |  | |

|  |  |
| --- | --- |
|  | **Please tick box if you do not wish us to contact your referees prior to an offer being made.** |

|  |
| --- |
| **SECTION 6: ESSENTIAL / DESIRABLE CRITERIA**  ***The requirements for the post (details of which are on the Person Specification) are listed in this section. Please demonstrate clearly how and to what extent you meet each requirement in the correct section. It is the candidate’s responsibility to clearly demonstrate in the correct section how they meet the criteria to be shortlisted for interview.***  ***Do not continue on additional pages or include any supplementary material – these will not be copied to the Selection Panel and therefore their content will not be considered.*** |
| **Essential Criteria 1. At least 6 months experience working as a Cleaner / Domestic Assistant in a paid or voluntary working environment.** *Please provide specific details of how you meet this criteria in no more than 200 words*. |
| **Desirable Criteria 1. Experience of working within a residential/care setting** *Please provide specific details of how you meet this criteria in no more than 200 words*. |
| **Desirable Criteria 2. Knowledge of COSHH.** *Please provide specific details of how you meet this criteria in no more than 200 words*. |

|  |  |
| --- | --- |
| **I declare that this information is accurate to the best of my knowledge.** | |
| **Incomplete applications may not be considered.** | |
| **Signed:** | **Date:** |



|  |  |
| --- | --- |
| **RECRUITMENT MONITORING FORM** | |
| **Please read the Guidance Notes provided before completing this form.**  Clanmil Housing Association is committed to equal opportunities and fair employment. Our aim is to ensure that all applicants are given equal opportunities regardless of age, disability, ethnic or national origin, gender, marital status, political opinion, race or colour, religion or sexual orientation. This sheet is detached from the remainder of your application and does not form any part in the selection process.  Please return it in the envelope provided.  Under Data Protection Regulations, this form will be held securely and only accessed by the Monitoring Officer in order to provide statutory statistics to the Equality Commission in Northern Ireland.  **The following section is compulsory and failure to complete will mean that we cannot consider your application.**  **You are required under Fair Employment Law to provide this information.** | |
| **Reference No.** | **DOM-CRAM-1-17** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date of Birth:** | | | | |
| **Gender** | | **Male Female Transgendered** | | |
| **Community Background** | **Protestant** | | **Roman Catholic** | **Neither Roman Catholic nor**  **Protestant** |
| **Please state the name of primary school attended in Northern Ireland:** | | | | |

**The following section will help Clanmil to monitor applications for employment to help promote equality of opportunity.**

**This section is voluntary and will not prevent your application being considered.**

|  |  |
| --- | --- |
| **DISABILITY**  ***The Disability Discrimination Act 1995 defines disability as “A physical or mental impairment which has a long-term affect on a person’s ability to carry out normal day-to-day activities.”*** | |
| Do you consider yourself to be disabled? | Yes No |
| If yes please tell us about your disability: | |
|  | |
|  | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **RACE/ETHNIC ORIGIN**  ***To which of these ethnic groups do you consider you belong:*** | | | | | | | |
| **WHITE UK/IRISH** | | | | **WHITE OTHER** Please specify | | | |
| **BLACK AFRICAN** | | | **BLACK CARIBBEAN** | | | | **BLACK OTHER** Please specify |
| **INDIAN** | **PAKISTANI** | | | | **BANGLADESHI** | | **MIXED ETHNIC GROUP** Please specify |
| **CHINESE** | | **IRISH TRAVELLER** | | | | **ANY OTHER GROUP** Please specify | |

|  |
| --- |
| **MARITAL STATUS** |
| **SINGLE** |
| **MARRIED/IN A CIVIL PARTNERSHIP** |
| **DIVORCED/FORMERLY IN A CIVIL PARTNERSHIP WHICH IS NOW LEGALLY DISSOLVED** |
| **WIDOWED FROM A MARRIAGE/CIVIL PARTNERSHIP** |
| **SEPERATED, BUT STILL LEGALLY MARRIED/IN A CIVIL PARTNERSHIP** |

|  |
| --- |
| **DEPENDANTS**  ***Do you have personal responsibility for the care of\_\_\_\_\_\_\_\_\_\_\_? (Tick each box that applies to your circumstances)*** |
| **A CHILD OR CHILDREN** |
| **A PERSON WITH A DISABILITY** |
| **A DEPENDANT OLDER PERSON** |
| **NONE OF THE ABOVE** |

|  |
| --- |
| **POLITICAL OPINION** |
| **UNIONIST** |
| **NATIONALIST** |
| **NEITHER** |

|  |
| --- |
| **SEXUAL ORIENTATION**  ***My sexual orientation is towards someone:*** |
| **OF THE SAME SEX (this covers gay men and lesbians)** |
| **A DIFFERENT SEX (this covers heterosexual men and women)** |
| **OF THE SAME SEX AND OF THE OPPOSITE SEX (this covers bisexual men and women)** |