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| **Reference Number:**ID-SW-18-137 | **Title of Post:**Support Worker (FT & PT) | **Location of Post:**Jean Todd Close, Antrim  |

**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Surname:       | Title:      |
| First Names (in full):      | Previous Surnames:      |
| Address:     Post Code:       | Telephone No (including std code):      Mobile Telephone No:      E-mail Address:      National Insurance Number:      |

**DRIVING LICENCE**

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| Do you hold a full Driving Licence which allows you to drive in NI?   Yes [ ]  No [ ] Do you have access to a car **OR** in respect of applicants with a disability who cannot hold a license consideration will be given to alternative travelling proposals? **Please give details:**  |

**ELIGIBILITY TO WORK IN THE UK**

Do you require a permit to work in the EU? Yes [ ]  No [ ]

If yes, please give details.

**REFEREES**

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| Please name two referees, who have knowledge of your present and/or most recent work **and** who are in a supervisory/managerial capacity. (Please note that referees will not be contacted until an offer of employment has been made).  |
| Name:      Occupation:     Address:     Post Code:      Telephone Number:     Email:      | Name:     Occupation:     Address:     Post Code:      Telephone Number:     Email:      |

**CURRENT PROFESSIONAL REGISTRATIONS**

**Detail University Degrees and/or Professional Qualifications.**

##### EMPLOYMENT HISTORY

**PRESENT POST (If unemployed – most recent post)**

|  |  |  |
| --- | --- | --- |
| Name and address of present employer     Address:               Post Code:       | Date appointed (DD/MM/YY)      Contracted Hours:       | Present salary per annum£      Please detail other elements of remuneration package      |
| Job Title and Grade       Reporting Relationship |
| Department / Work Location       |
| Period of Notice Required       |
| Please give reason for leaving. Also indicate leaving date (if applicable):      |
| Principal Duties       |

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| PREVIOUS EXPERIENCE Please give details of all previous posts held, **beginning with the most recent**. If you have held more than one position with an employer please give details of each position. (Please attach additional pages as required)  |
| Employer’s name and address | Job Title and Grade | Duties (briefly) | From | To | Reason for Leaving |
| DD/MM/YY | DD/MM/YY |
|       |       |       |       |       |       |
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## GAPS IN EMPLOYMENT

If there are any gaps in your employment please explain further below;

**DEMONSTRATING YOUR ESSENTIAL EXPERIENCE**

**The following sections ask you to outline how you meet the essential experience and desirable criteria specified in the Personnel Specification. Applicants must clearly demonstrate experience giving examples and provide full details of any relevant qualifications with the grade /level obtained. If you fail to deal with each experience criterion in the personnel specification the selection panel will find it difficult to assess your application form and may be unable to invite you to interview. The selection panel will not make assumptions as to the skills, knowledge and experience you may have gained.**

**Essential Criteria**

**Circumstances: To be flexible as the role** **involves 24 hour cover on a rota/shift basis.** Please provide detailed information demonstrating how you meet this criterion (150 words maximum).

**Essential Criteria**

**Experience:- A minimum of 6 month’s experience of supporting people in a caring field as a paid employee, volunteer or carer.** Please provide detailed information demonstrating how you meet this criterion (400 words maximum).

**Essential Criteria**

**Experience:- Knowledge and understanding of learning disability issues.** Please provide detailed information demonstrating how you meet this criterion (400 words maximum).

**WORKING HOURS:**

**Please select below the amount of hours that you would prefer to work.**

**[ ]  13 hours per week**

**[ ]  26 hours per week**

**[ ]  39 hours per week**

**HOLIDAY ARRANGEMENTS**

Please indicate planned holiday arrangements or other dates when you are unavailable for interview.

**ADVERTISING**

Please indicate how you became aware of this vacancy:

|  |  |
| --- | --- |
| **Belfast Telegraph** **[ ]**  | **Community NI** **[ ]**  |
| **NI Jobs** **[ ]**  | **Job Centre** **[ ]**  |
| **Inspire Website [ ]**  | **Twitter [ ]**  |
|  **Other [ ]**  **(Please Specify)**  | **Internal [ ]**  |

**PERSONAL DECLARATION**

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| I declare that to the best of my knowledge the information given is honest and accurate. I understand that any wilful misstatement or mission renders me liable to disqualification or, if appointed, to dismissal. I understand that the appointment is subject to receipt of satisfactory reference, pre-employment health assessment, the verification of qualifications required for the post (as per the personnel specification) and relevant disclosure check. Please be advised that Inspire adheres to the Access NI Code of Practice and has a policy on the recruitment of ex-offenders, copies of which are available upon request from the HR Department.  I hereby give consent for the information on this form to be collected, stored and processed in accordance with the provisions of the Data Protection Act 1998.**Signature:­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**APPLICANTS:**

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| * **Application forms must be completed in full.**
* **CV’s will not be accepted.**
* **Application forms received after the deadline date and time will not be accepted.**
* **Inspire does not accept faxed or e-mailed application forms.**
* **Please return the Equal Opportunities Monitoring Form with your application.**
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**Completed application forms should be returned by the closing date to:**

**Human Resource Department**

**Inspire**

**Lombard House**

**10-20 Lombard Street**

**Belfast**

**BT1 1RD**

**PLEASE BE ADVISED THAT THIS PAGE SHALL NOT BE MADE AVAILABLE TO THE SHORTLISTING PANEL – FAILURE TO COMPLETE THIS SECTION WILL RENDER YOUR APPLICATION INVALID.**

**MEDICAL HISTORY**

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| Please provide details and approximate dates of **all periods** of sickness during the **past 2 years**.*(Please continue on separate sheet if necessary)* |

|  |  |  |
| --- | --- | --- |
| **Dates of Sickness** | **No. of days** | **Reason for Sickness** |
|  |  |  |
|  |  |  |
|  |  |  |
| Please give details of any illness you suffer from or have suffered from which could affect your capacity to work.     Inspire reserves the right to verify the above information with your current or previous employer, and any offer of employment will be subject to satisfactory medical examination |

**EQUAL OPPORTUNITIES MONITORING FORM**

**Reference No: ID-SW-18-137**

Inspire is an Equal Opportunities Employer. We do not discriminate against our job applicants or employees and we aim to select the best person for the job. All recruitment decisions will be made objectively.

We monitor the community background of our job applicants and employees in order to demonstrate our commitment to promoting equality of opportunity in employment and to comply with our duties under the Fair Employment and Treatment (NI) Order 1998. Your answers will be used by us to prepare a monitoring return to the Equality Commission, but your identity will be kept anonymous. In all other regards your answers will be treated in the strictest confidence.

**1. COMMUNITY BACKGROUND:**

Regardless of whether they actually practice a particular religion, most people in Northern Ireland are perceived to be members of either the Protestant or Roman Catholic communities.

**Please indicate the community to which you belong by ticking the appropriate box below:**

I am a member of the Protestant community: 

 I am a member of the Roman Catholic community: 

 I am not a member of either the Protestant or the

 Roman Catholic communities: 

If you do not answer the above question, we will use the residuary method, which means that we can make a determination as to your community background on the basis of the personal information supplied by you in your application form/personnel file.

***Note: If you answer question 1 you are obliged to do so truthfully as it is a criminal offence under the Fair Employment (Monitoring) Regulations (NI) 1999 to knowingly give false answers to this question.***

**---------------------------------------------------------**

**In order to ensure Inspire is complying with other equal opportunity legislation, we would be grateful if you could also complete questions 2 – 5.**

**2. GENDER:**

**Please indicate your gender by ticking the appropriate box below:**

 **Male**:  Female: 

**3. AGE:**

**Please state your date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4. RACE:**

The Race Relations (Northern Ireland) Order 1997 makes it unlawful to discriminate in employment on grounds of colour, race, nationality or ethnic or national origins. Inspire monitors its workforce in line with recommended good practice. Please tick the appropriate box:

White [ ]  Black African origin [ ]  Pakistani origin [ ]

Black Caribbean origin [ ]  Bangladeshi origin [ ]  Mixed ethnic group [ ]

Chinese origin [ ]  Indian origin [ ]  Irish Traveller Community [ ]

Other origin (please specify)

**5. DISABILITY:**

Under the Disability Discrimination Act 1995 a person is deemed to be a disabled person if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. Please note that it is the effect of the impairment without treatment which determines whether an individual meets this definition.

**5.1 Do you consider that you are a disabled person?**

 [ ]  Yes [ ]  No

If you answered “yes”, please indicate the nature of your impairment below;

5.2 Do you require any arrangements to assist you if called for interview/interview exercise?

 [ ]  Yes [ ]  No

If yes, please state the arrangements which will be needed for you to attend.

5.3 Do you foresee that you might require reasonable adjustments to be made if you were appointed to the post?

 [ ]  Yes [ ]  No

If yes, please detail the reasonable adjustments you might expect?

Please note that in relation to a post where travelling is an essential job requirement, for applicants with a disability who cannot hold a driver’s licence, consideration will be given to alternative travelling proposals.