**APPLICATION FOR EMPLOYMENT**

**Post Applied for:** Family Engagement Worker

**Location of Post:** Home based North East England

**Closing Date:** 8am, 9th July 2018

**Duration:** For an initial period of 2 years

**Please return application to:** mariana.ortiz@LDEngland.org.uk

**SECTION A: YOUR SKILLS AND EXPERIENCE**

**Experience**

Please tell us how you meet the requirements for the role.

**Please refer to the PERSON SPECIFICATION to see what we are looking for and demonstrate how your skills, knowledge and experience meet the criteria.** Please give examples where appropriate.

**Please tell us why you are applying for this post and why you would like to work for The JMS Trust and LDE**

**Employment History**

Please provide a complete record of employment starting with the most recent. Include voluntary work and any other relevant experience. Please continue on a separate sheet, clearly labelled, if necessary.

|  |  |  |
| --- | --- | --- |
| **Name and Address of Organisation** | **Position/Job Title** | **Dates** |
| **From** | **To** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Education and Qualifications**

**Please continue on a separate sheet, clearly labelled, if necessary.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of School/College/University** | **Dates of Attendance** | **Course Title and Level** | **Result/ Grade** |
| **From** | **To** |
|  |  |  |  |  |
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|  |  |  |  |  |

**Training**

Please tell us about any training that you have undertaken that may be relevant to the role.

|  |  |  |
| --- | --- | --- |
| **Course Title/Topic** | **Duration** | **Date of Course** |
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**SECTION B**

**YOUR PERSONAL INFORMATION**

The information in this section will not be used in the shortlisting process. For interview relevant information will be sent to the recruiting manager. At no point will your equal opportunities information be disclosed.

**Personal information**

**Surname** **Ms/Mr/Mrs/**

**Miss/Other**

**Other Names Date of**

 **Birth**

**Address Contact**

**Tel no:**

**National**

**Insurance**

**Number**

**Email**

**We are committed to interviewing all applicants with a disability who meet the person specification.**

**It would therefore help us if you supplied the following information about your personal circumstances.**

**Do you have a disability? Y/N?**

**If yes please describe any adjustments or support you would require at interview.**

**Referees**

**Learning Disability England asks for 2 references. One should be your current or most recent employer. The second should preferably be a previous employer but may be another previous employer or a character reference. A character reference may be supplied by someone who has known you well for more than 3 years, and is not a member of your family.**

**We will also contact one of the referees you supply by telephone if you are successful in being offered the position.**

|  |  |  |
| --- | --- | --- |
| **1.** | **Name of Referee** |  |
| **Position** |  |
| **e-mail address** |  |
| **Address** |  |
| **Postcode**  |  |
| **Telephone Number** |  |
| **Relationship to referee?** |  |
| **2.** | **Name of Referee** |  |
| **Position** |  |
| **e-mail address** |  |
| **Address** |  |
| **Postcode**  |  |
| **Telephone Number** |  |
| **Relationship to referee?** |  |

**Asylum and Immigration Act 1996**

Under the Asylum and Immigration Act, we have a legal obligation to ensure that all staff have the right to work in the UK. Therefore any offer of employment will be subject to the provision of documentary evidence to demonstrate that you are entitled to work in the UK.

I confirm that I am entitled to live and work in the United Kingdom. Y//N?

I confirm that I am entitled to live and work in the United Kingdom. Y//N?

**Declaration**

I understand that, to the best of my knowledge, all the information given by me on this application form, is complete and true, I understand that, if I have made any false statement or have deliberately omitted any information or if any information I have given is misleading in any way, this may be sufficient cause for the rejection of my application or, if I am already employed by LDE or The JMS Trust, for dismissal without notice.

**SIGNATURE:** **DATE:**

**Please type in your name if completing the form electronically.**

Data Protection Act – The information contained in this application form will be used by Learning Disability England and The JMS Trust for the purpose of processing your application, assessing your performance in the future (should your application be successful) and monitoring the efficiency of our recruitment and other employment processes.