**APPLICATION FOR EMPLOYMENT**

**Post Applied for: Communications lead**

**Closing Date:** 8am 4th November 2019

**Please return application form to:** **info@LDEngland.org.uk**or by post to the Faversham office

*Unfortunately, we will only be able to contact shortlisted candidates due to the anticipated high volume of applicants.*

**SECTION A: YOUR EXPERIENCE AND EMPLOYMENT HISTORY**

**Experience**

In this section we need you to give us specific information in support of your application and tell us why you think you are the best candidate for the role.

**Please refer to the PERSON SPECIFICATION (towards the end of this document) to see what we are looking for in your answers and demonstrate how your skills, knowledge and experience meet the criteria.**

**PERSONAL STATEMENT**

**WHY I WANT TO DO THIS JOB**

**Please explain why you’re applying for this job and why you’d like to work with LDE. Please write in plain English. This means writing clearly, without using complicated language or jargon.**

**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** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**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** |
|  |  |  |

**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**

**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 a character reference. A character reference may be supplied by someone who knows you well and for more than 3 years, and is not a friend or 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 the successful candidate is entitled to work in the UK.

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, including the medical information, 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 Learning Disability England, 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 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.