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**Application Form**



Plea se ensure you complete all sections of this form before returning, accompanied by a CV and a Personal Statement

**Post :**

RSCP Independent Chair/Scrutineer and RSAB Independent Chair

**Personal Details**

Last Name

First Names Title:

Address

Postcode

Telephone: Telephone:

Email:

NI Number: Do you require a work permit? YES/NO

**Current/Last Employment**

Name and Address of Employer

Job Title

Dates from to

**Brief description of responsibilities**

Postcode

**Employment History since completing education (most recent post first)**

Please account for all gaps in employment history and continue on a separate sheet if necessary

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employer’s name and address | Please give exact dates: | | Job title | Reason for leaving |
| from | to |
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**Education and Qualifications**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Secondary School/ College/University | Dates | | Qualifications gained | Grades | Date |
| from | to |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Membership of Professional Bodies**

|  |  |  |
| --- | --- | --- |
| Body | Membership status (state whether by examination) | Date |
|  |  |  |
|  |  |  |

**Training**

**Experience**

Please use this section to show how you meet the requirements of the Person Specification, referring to your education/qualifications, experience, knowledge, skills, and competencies, paid or unpaid work. Give examples using active words like "I wrote/planned or organised.

**References**

References are normally taken for successful candidates before an appointment is confirmed. For most positions these will cover the last 3 years of employment history and must be satisfactory to the Council. You must provide the names and contact details of all referees to cover your last 3 years employment, or, if appropriate, your last school, college or university. It is our practice to contact the relevant HR departments to confirm that the person given as a referee has the authority to write a reference. If you have any gaps in your employment, you must provide us with details what you were doing during this time. Please use a separate sheet if required.

|  |  |
| --- | --- |
| Name of referee: | Name of referee: |
| Position: | Position: |
| Name and address of the organisation | Name and address of the organisation |
|  |  |
|  |  |
|  |  |
| Phone number | Phone number |
| E-mail address | E-mail address |
| How do you know them? | How do you know them? |

**Relations**

**Are you related to a councillor or employee of the London Borough of Redbridge? YES/NO**

If ‘Yes’ please state the name of the councillor or employee and the relationship:

**Disability**

The Disability Discrimination Act protects people with disabilities from unlawful discrimination. To meet the Act’s definition, a person must have, or have had a physical or mental impairment, which had substantial long-term effects on their ability to carry out normal day-to-day activities. If we know you have a disability we will make adjustments to the working arrangements and/or the working environment provided it is reasonable in the circumstances to do so.

**Do you have a disability you wish us to know about at this stage? YES/NO**

Please let us know what access requirements you may have.

### Declaration

By submitting this form, you certify that all the information provided is true and that you have not canvassed a councillor or employee of the Council directly or indirectly in connection with this application, and will not do so.

You understand that any such activity, or failure to disclose any personal relationship with a councillor or employee of the Council, will disqualify your application.

I acknowledge that if any of the information is found to be false by virtue of statement or omission after any appointment, I may face disciplinary action, which could result in my dismissal without notice.

I give consent to process the enclosed personal data under the Data Protection Act 1998 on the understanding that it is used to determine my suitability for the post applied for.

**Prevention of Fraud**

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. This may include matching the information on this form with other information we hold about you from other sources, including data held on computer records. We may also share this information, for the same purpose, with other organisations, which handle public funds.

**Name:**

**Signed: Date:**

When completed, please return this form to: Lesley Perry, Partnerships Manager, via [Lesley.Perry@redbridge.gov.uk](mailto:Lesley.Perry@redbridge.gov.uk) .

Workforce Monitoring



**Applicant Ref. No.**

In line with the Codes of Practice of the Equality and Human Rights Commission Redbridge Council collects and maintains information on gender, ethnic origin and disabilities of its employees. Redbridge Council will also collect and maintain information on sexual orientation, age and religion or belief of its employees. The information you have supplied will be kept confidential within Human Resources. Departments will only see statistical information and it will only be used to provide an overall profile analysis of Redbridge Council.

It will be appreciated if you will complete this section of the application form, which will be separated from the rest of the form before shortlist selection takes place.

You can be assured that this information will be treated in confidence and will not be available to short listing officers or interviewers or to future potential managers.

**1. Gender** Male Female

x

**2. What is your ethnic group?**

Please choose one selection from A to E a nd then tick the appropriate box within your chosen section to indicate your cultural background.

**A. White**

British Irish

Any other White Background

**B. Mixed E. Chinese or other Ethnic Group**

White and Black Caribbean Chinese

White and Black Asian Any other background

**C. Asian or Asian British**

Indian Any other Asian background

Bangladeshi

Pakistani

**D. Black or Black British**

Caribbean

White and Black African

African

Any Other Black background

**3. Disability**

The Equality Act 2010 protects people with disabilities. The Act defines a person as disabled if they have a

physical or mental impairment, which has a substantial and long term effect (i.e. has lasted or is expected to last at least 12 months) and has an adverse effect on the person’s ability to carry out normal day to day activities.

3a: Do you consider yourself to have a disability according to the terms given in the Equality Act?

Yes No

3b.Please tick if any of the following types of disability apply to you. People may experience more than one type of disability, in which case tick all the types that apply. If your disability does not fit any of these types, please tick ‘other’ and state your disability

Long standing illness such as cancer, HIV, diabetes, disease or epilepsy

Sensory impairment, such as being blind, having a serious visual impairment or being deaf, having a serious hearing impairment

Physical impairment, such as difficulty using your arms or mobility issues which means using a wheelchair or crutches

Learning disability (such as Down’s syndrome or dyslexia) or cognitive impairment (such as autism or head-injury)

Mental health condition, such as depression

Other (please state):

4. What is your religion or belief?

Agnostic Buddhist Jain Sikh

Atheist Christian Jewish No Religion

Baha Hindu Muslim

Any other religion or belief (Please state): Prefer not to say

5. What is your sexual orientation?

Bisexual

Gay Man

Gay Woman/Lesbian

Heterosexual

Prefer not to say

Declaration of Criminal Offences



Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013).

The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers and cannot be taken into account.

Guidance and criteria on the filtering of these cautions and convictions can be found on the [Disclosure and Barring Service website](https://www.gov.uk/government/collections/dbs-filtering-guidance).

**Declaration of Criminal Offences**

If you do not have any, please write none.

|  |  |  |
| --- | --- | --- |
| **Details of offence(s)** | **Place and date**  **of Judgement(s)** | **Sentence(s)** |
|  |  |  |
|  |  |  |

All information given will be treated in the strictest confidence and will be used for this job application only.

I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may after appointment lead to disciplinary action, which could lead to my dismissal without notice.

**Name: (please print)**

**Signed: Date:**