



Confidential

Application Number (For official use only) _____

Please complete in type or black ink (refer to guidance notes for help)

Post Title _____ Post Ref No _____

Section / Team _____

Part B – Higher Education and Training

Please give details of courses attended and examination results, including the most relevant work based training. (Please continue on a separate sheet if necessary).

Name of establishment	Examination results (subject, level, grade)

Part C – Present or most recent employment

Name and address of employer _____

_____ Post Held _____

Date started _____ Until _____ Salary _____

Key roles/achievements

1 _____

2 _____

3 _____

Reason for leaving _____

Employment History

(Only list 3 previous jobs (most recent first) or last 10 years of employment, whichever is the shorter)

Name and address of employer _____

_____ **Post Held** _____

Date started _____ **Until** _____ **Salary** _____

Key roles/achievements

1 _____

2 _____

3 _____

Reason for leaving _____

Name and address of employer _____

_____ **Post Held** _____

Date started _____ **Until** _____ **Salary** _____

Key roles/achievements

1 _____

2 _____

3 _____

Reason for leaving _____

Name and address of employer _____

_____ **Post Held** _____

Date started _____ **Until** _____ **Salary** _____

Key roles/achievements

1 _____

2 _____

3 _____

Reason for leaving _____

Part D – Experience / Relevant skills/ further information

Use this section to show how you meet all of the short listing criteria for the job as set out in the person specification, drawing on all aspects of your education, past, and present employment, paid or unpaid, voluntary work and home responsibilities. You should also include relevant experience not previously mentioned in this form. (Please continue on a separate sheet if necessary).

Do you hold a current driving licence?

Yes

No

If yes, please specify type of licence _____

Part E – Verification of employment or education record

Please give names and addresses of two people who can provide employment references. One should be your present/most recent employer, and preferably your immediate manager.

Name _____ Name _____

Address _____ Address _____

Position Held _____ Position Held _____

Tel No. _____ Tel No. _____

If you have not been in paid employment, please give the name of head of education or training establishment and/or the manager of a voluntary group for whom you have worked.

Please tick this box if you do not wish Brent Housing Partnership to approach your present employer until, and if, a firm offer of employment has been made. We normally take up references if you have been shortlisted.

Relatives/Other interests (canvassing of councillors, board members or company employees)

Are you related to, partner of, any board member of Brent Housing Partnership or any councillor or council employee or employee of Brent Housing Partnership? Yes No

If yes, please state the name and if an employee, the title of the post they hold:

Name _____ Job title _____

Councillor Board Member Council employee BHP employee

If appointed, do you have any business and/or financial interests which might conflict with the duties of this post? Yes No

Rehabilitation of Offenders Act

You do not generally have to disclose details of spent convictions. However if the post you are applying for is exempt from the Rehabilitation of Offenders act by virtue of the (Exceptions) order because it involves access to persons who are disabled, or addicted to drugs or alcohol or under 18 or over 65, you must reveal details of all convictions, spent or otherwise.

Have you ever been convicted of a criminal offence? Yes No

If yes, please give details of conviction(s) and date(s) on a separate sheet and send in a sealed envelope which will not be opened unless you are shortlisted for interview.

Declaration

I declare that to the best of my knowledge the information given on this form is correct and can be treated as part of any subsequent contract of employment. Failure to disclose information or providing deliberate false information may result in disciplinary action being taken against you.

Brent Housing Partnership is under a duty to protect the public funds it administers and to this end may use the information you have provided in this form within the organisation for the prevention and detection of fraud. It may also share this information with other bodies administering public funds for this purpose.

Signature _____ Date _____

Brent Housing Partnership
Application form



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Please complete in type of black ink (refer to the guidance notes for help)

Name _____

Post Title _____ Post Ref No. _____

Section / Team _____

Personal Details (use block letters)

Brent Housing Partnership has an Equal Opportunities Employment Policy to ensure that all applicants are treated fairly and are appointed solely on their suitability for the post irrespective of race, gender, disability, sexuality, age, non trade union and trade union membership, creed, colour, nationality, religion, language, political opinion or affiliation, gender re-assignment, marital status, family connections, caring responsibilities or unrelated criminal conviction.

All stages of the recruitment process are monitored to check that unfair discrimination is not taking place.

Please complete the following by ticking the relevant boxes. Once completed, please put in the envelope provided and return with your application form.

I would describe my race or ethnic origin as

White

English/Welsh/Scottish/Northern
Irish/British
 Irish

Gypsy or Irish Traveller
 Any other white Background
(please specify) _____

Mixed

White & Black Caribbean
 White & Black African
 White & Asian
 Any other mixed multiple
Ethnic background (please specify) _____

Asian or Asian British

Indian
 Pakistani
 Bangladeshi
 Chinese
 Any other Asian
Background (please specify) _____

Black/African/Caribbean/Black British

African
 Caribbean
 Any other Black
African/Caribbean background (please specify) _____

Other

Arab
 Other ethnic group
 (please specify) _____

Gender

Male Female

Please indicate your age range

16 – 25 25 – 35 36 – 45
 46 – 55 56 – 65

Do you have a disability? Yes No

A person has a disability under the Equality Act 2010 if he/she has a physical or mental impairment or health problem which has a substantial and long term adverse effect on his/her ability to carry out normal day to day activities. Long term means it has lasted, or is expected to last for 12 months.

If you have answered yes, please give details of your disability below:

.....
.....
.....

Please state where you saw this position advertised

Office Use Only

Form entered on database Yes No

Notes

