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| *Leave empty. Office use only* | |
| **REF:** |  |

##### FORM 1 OF 3

**APPLICATION FORM**

|  |  |
| --- | --- |
| Job Title | OCLT Co-ordinator |

|  |  |
| --- | --- |
| **Applicant Name:** |  |
| **Address:** |  |
| **Evening telephone:** |  |
| **Daytime telephone:** |  |
| **Mobile:** |  |
| **E-mail address:** |  |

|  |  |
| --- | --- |
| Eligibility to work in the UKAre you subject to any restrictions on taking paid employment in the UK? If YES, please give brief details | Yes/No  If yes please give details: |
| Rehabilitation of Offenders Act 1974 Do you have any criminal convictions which are not SPENT? If yes, please give details of any unspent convictions | Yes/No  If yes please give details: |
| **Are you a friend or relative of any member of staff or Director of Oxfordshire Community Land Trust?** If YES, please provide their name and the nature of the relationship | Yes/No  If yes please give details: |

NB: Proof of identity will be required prior to any offer of employment in compliance with Asylum and Immigration legislation. This will be requested if you are called for interview.

### Referees

We will contact you before we request references, but please give the name, address, telephone number and email of two referees, stating how long you have known them and in what capacity. One should be your current or most recent employer who is giving a reference on behalf of that company.

**Referee 1 Referee 2**

|  |  |  |
| --- | --- | --- |
| **Name:** |  |  |
| **Job Title:** |  |  |
| **Address:** |  |  |
| **Telephone Number:** |  |  |
| **Email address:** |  |  |
| **How long have you known them for:** |  |  |
| **In what capacity do you them?** |  |  |

**Declaration**

I declare that I have completed this application myself and the information I have provided in this application is true and accurate to the best of my knowledge. I agree that any information on this application that is found to be false, or any wilful omission of relevant information may lead to the withdrawal of the offer of employment, or the subsequent termination of employment.

**Signed: Date:**

If using an electronic application form please enter a cross through this box to validate your application and indicate your acceptance of the above declaration.

If you send this form by email, you are not required to post it.

For monitoring purposes, please state where you saw the post advertised:

**Return your completed electronic application form to:** fran@oclt.org.uk

**Return hardcopy application forms to:** Fran Ryan OCLT, 55 Henley Avenue, Oxford OX4 4DJ.

**All applications, either electronic or hardcopies must be received by the closing deadline. Late submissions will not be accepted.**

##### FORM 2 OF 3

|  |  |
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| *Leave empty. Office use only* | |
| **REF:** |  |

##### EDUCATION AND EMPLOYMENT

|  |  |
| --- | --- |
| Job Title | OCLT Co-ordinator |

#### EDUCATION AND QUALIFICATIONS (most recent first)

Where applicable, please include details of examinations which have still to be taken or for which results are not yet available.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***School or College*** | ***Subject*** | ***Qualifications Gained*** | ***Grade/result*** | ***Date*** |
|  |  |  |  |  |

#### TRAINING / PROFESSION QUALIFICATIONS

Please give details of any other training you have undertaken that may support your application. Include details of membership or affiliation to any professional institutions.

|  |  |  |
| --- | --- | --- |
| ***Details of training completed*** | ***Grade/Result*** | ***Date*** |
|  |  |  |

*NB: If you are invited for an interview we may require evidence of the qualifications you have referred to in your application.*

**PRESENT EMPLOYMENT / VOLUNTARY EXPERIENCE**

|  |  |  |
| --- | --- | --- |
| **Name of employer** | **Position** | |
|  |  | |
| **Employers address** | **Date appointed:** |  |
|  | **Present salary/wage:** |  |
| **Main duties and responsibilities** | | |
|  | | |
| **Reason for leaving** | | |
|  | | |

**Previous Employment**(Please start with most recent stating up to 10 years of past employment; add or delete rows as needed)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name and address of employer** | **Position and main duties** | **Start**  **date** | **End Date** | **End Salary** | **Reason for leaving** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**REASONS FOR APPLYING**

Please outline the skills, experience and knowledge you have gained through paid or unpaid employment, education or leisure interests, which demonstrate the qualities required in the person specification for the post for which you are applying (Max. 1,500 words; please expand the box to fit)

|  |
| --- |
|  |

**ADDITIONAL INFORMATION**

Please use this space to tell us anything about yourself that would support your application. This may include information that is not specific to the post for which you are applying, but may benefit the organisation in other ways (Max 250 words; please expand or reduce the box to fit)

|  |
| --- |
|  |

##### FORM 3 OF 3

|  |  |
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| *Leave empty. Office use only* | |
| **REF:** |  |

**EQUALITIES ACT**

|  |  |
| --- | --- |
| **Job Title** | **OCLT Co-ordinator** |

OCLT is opposed to discrimination in all its forms and will take all necessary steps to eliminate discriminatory practices. Equality of opportunity is central to all our activities and we operate a policy that aims to ensure that unlawful or otherwise unjustifiable discrimination does not take place in recruitment.

This information is confidential and does not form part of your application.

It will be detached from your application form when it is received and the information will not be taken into account when making the appointment. The information will be held securely in accordance with the principles of the General Data Protection Regulation (GDPR) and will not be published on an individual basis.

|  |
| --- |
| **Age Group** |

What is your age group? *Please select.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 16 – 24 years |  | 35 – 39 years |  | 50 – 54 years |  |
| 25 – 29 years |  | 40 – 44 years |  | 55 – 59 years |  |
| 30 – 34 years |  | 45 – 50 years |  | 60+ years |  |

|  |
| --- |
| **Do you consider yourself to have a disability or health condition?** |

Do you consider yourself to have a disability or health condition?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Yes |  | No |  | Prefer not say |  |

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:

*The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.*

|  |
| --- |
| **Ethnic Origin** |

*Please note that these categories reflect those used in the 2011 Census.*

How would you describe your ethnic origin? (If you do not identify with any of the categories listed, please use the ‘other’ categories). *Please tick one box. (list carries onto next page)*

|  |  |  |
| --- | --- | --- |
| WHITE | English |  |
| Welsh |  |
| Scottish |  |
| Norther Irish |  |
| British |  |
| Gypsy or Irish Traveller |  |
| Other white |  |
| Mixed/multiple ethnic groups | White & black Caribbean |  |
| White & black African |  |
| White & Asian |  |
| Any other mixed background |  |
| Asian or Asian British | Indian |  |
| Pakistani |  |
| Bangladeshi |  |
| Chinese |  |
| Other Asian |  |
| Black / African / Caribbean / Black British | Caribbean |  |
| African |  |
| Other black |  |
| OTHER | Other ethnic group |  |
|  | Don’t know/not sure |  |
|  | Would rather not state |  |

|  |
| --- |
| **Religion/Belief** |

|  |  |
| --- | --- |
| How would you describe your religion/belief? | |
| Christian |  |
| Buddhist |  |
| Hindu |  |
| Jewish |  |
| Muslim |  |
| Sikh |  |
| Other |  |
| None |  |
| Don’t know/not sure |  |
| Would rather not state |  |

|  |
| --- |
| **Sexual Orientation** |

|  |  |
| --- | --- |
| How would you describe your sexual orientation? | |
| Heterosexual |  |
| Gay/lesbian |  |
| Bisexual |  |
| Other |  |
| Would rather not state |  |

|  |
| --- |
| **Gender** |

|  |  |
| --- | --- |
| Man |  |
| Woman |  |
| Intersex |  |
| Non-binary |  |
| Prefer not to say |  |
| If you prefer to use your own term please specific here | …………………………………………………………… |