**UK DEAF SPORT APPLICATION FORM**

**Position applied for:**

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**How did you learn about this vacancy?**

[ ] Our website [ ] Word of mouth [ ] Jobsite [ ] Other

All sections must be completed.

1. **PERSONAL DETAILS**

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| --- | --- | --- | --- |
| **Preferred Title:** |  | **National Insurance No:** |  |
| **Surname:** |  | **First Name(s):** |  |
| **Current Address:**  |  |
| **Telephone (Home):** |  | **Telephone (Mobile):** |  |
| **Email address:**  |
| **Do you need a Work Permit before you can be employed in this country**? Yes [ ] No [ ] If yes, please give details |
| **Do you have a disability that we should consider in your application, interview or employment?** If yes, please give brief details of your disability and any reasonable adjustments.*We ask this question to enable us to consider any adjustments that we can make, either to the recruitment process itself or in employment, in order to assist you. This will not form part of the selection process*. |
| **If appointed, how soon could you take up the post?** | **Do you hold a current UK driving licence and access to a vehicle?** |

1. **CURRENT EMPLOYMENT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employer and Establishment** | **Position and Brief Description of Duties** | **From** | **To** | **Reason for considering a new role** |
|  |  |  |  |  |

1. **PREVIOUS EMPLOYMENT DETAILS**

Please list in chronological order, with precise dates. (Please use additional sheets as required)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employer and Establishment** | **Position and Brief Description of Duties** | **From** | **To** | **Reason for Leaving** |
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1. **EDUCATION AND QUALIFICATIONS**

(Please give details of qualifications i.e. GCSEs, A Levels, Degree).

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| **Qualification** | **Establishment** | **Date** | **Results/Grade** |
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If the post requires specific qualifications, you will be required to provide documentary evidence before employment.

**TRAINING COURSES ATTENDED AND OTHER NON-QUALIFICATION LEARNING**

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| --- | --- |
| **Course and Organising Body** | **Date** |
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1. **REFERENCES**

Please give the name and address of two referees, one of whom must be your current or most recent employer, who can comment on your suitability for this post. If you were known by a different name, please also state this. If you would prefer us not to contact them until a conditional offer for the position has been made, please indicate this in the space provided. **References from friends or relatives are not acceptable.**

|  |  |  |
| --- | --- | --- |
| **1) Name:**  | **Status and capacity for knowing you:** | **May we contact this referee at short-listing stage?** |
| **Address:**  |  |  |
| **Email:**  |
| **Telephone:**  |
| **2) Name:**  |  |  |
| **Address:**  |
| **Email:**  |
| **Telephone:**  |

1. **GENERAL INFORMATION**

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| --- | --- |
| **Are you a relative or partner of any employee or Trustee of UK Deaf Sport?** **If yes**, please provide details: |  |
|  |
| **Has someone else completed this form on your behalf? If yes**, please provide the person’s name and an explanation: |  |
|  |
| **Have you had any previous contact, or do you have any current contact, with UK Deaf Sport? If yes,** please give details: |  |
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1. **DECLARATION**

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| If you knowingly submit false information or attempt to omit or conceal any relevant fact concerning your eligibility for employment, then your name will be withdrawn from the list of candidates. Providing false information is an offence and if this is discovered after you have been appointed you will be liable for summary dismissal and may result in prosecution. You may also be referred to the Police.Please sign this declaration acknowledging your responsibility to disclose any information to the panel which may affect working with children, young people or vulnerable adults. I certify that the information given above and overleaf is correct to the best of my knowledge. I accept that if any of the enclosed information is found to be untrue or misleading after my appointment, I may be liable for dismissal without notice. |
| **Signature:**  | **Date:**  |

**PERSON SPECIFICATION FORM**

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| --- | --- |
| **Name:** |  |
| **Job Title:** |  |

You are requested to complete this form (using supplementary sheets if there is insufficient space for any entry)

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| **KNOWLEDGE/EDUCATION/QUALIFICATIONS relevant to the role** |
|   |
| **EXPERIENCE relevant to the role** |
| *Please give examples of projects, tasks, experience and learning you have undertaken which example your ability to demonstrate the competencies required of the role.*  |
| **ABILITIES AND SKILLS relevant to the role** |
| **Please detail how you meet the role requirements (detailed on the Job Description) for this post, illustrating with examples from work, voluntary or life experiences, and stating why you are applying for this job.** |
| **Signed:**  | **Date**:  |

# YOU NOW NEED TO COMPLETE THE DECLARATION OF CRIMINAL BACKGROUND INFORMATIO

# DECLARATION OF CRIMINAL BACKGROUND INFORMATION

The Rehabilitation of Offenders Act 1974 sets out to help people who have been convicted of a criminal offence and have not been convicted again in a specified period. This period is known as a rehabilitation period. Once a rehabilitation period has expired and no further offending has taken place, a conviction is considered to be ‘spent’. Once a conviction is spent, the convicted person does not have to reveal it or admit its existence in most circumstances.

The Rehabilitation of Offenders Act 1974 [Exceptions Order] gives some **exemptions** from the Act, whereby details of ‘spent’ convictions have to be declared. One of these exemptions is working with vulnerable adults. When recruiting people to work in such positions of trust an employer is entitled to ask for details of all convictions, spent and ‘unspent’.

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| --- |
| **The information you provide will remain confidential** |
| Name:  | Position applied for:  |
| Please give details, including date, offence and, where appropriate, sentence of all criminal convictions, cautions, reprimands and final warnings (spent and unspent) below. If none, please write ‘NONE’.  |
| **Offence** | **Date** | **Sentence** |
| **Offence** | **Date** | **Sentence** |
| **Offence** | **Date** | **Sentence** |
| I understand that if my application is successful, I will be asked to apply for a higher-level Disclosure.Signature Date ***If you wish to discuss the information you have given above at your interview, please ensure that you mention this to the interviewer.***This information will be treated as private and confidential |

**GENERAL DATA PROTECTION REGULATION**

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| --- |
| I hereby give my consent for the Recruitment Monitoring information provided in the pack to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the General Data Protection Regulation. Signature Date  |

**PLEASE RETURN THIS FORM TO:**

**Valerie Copenhagen, Executive Director at:**

**info@ukds.org.uk**

**Valerie Copenhagen, UK Deaf Sport, c/o Hanburys, Parkway, 6B, Porters Wood, St Albans, AL3 6PA**