

GUIDELINES FOR COMPLETION OF THIS APPLICATION FORM

HOPE INTO ACTION asks all applicants to complete the information below fully and to the best of your ability.

Once complete, please return it by email to the address indicated in the advertisement or by post, ensuring it reaches us by the advertised closing date at:

Hope into Action UK HR Administrator 26 North Street, Peterborough PE1 2RA

Please note that all applications received after the closing date will be automatically rejected as standard practice and without exception, in the interests of fair process.

Successful applicants will be required to attend an interview.

Most positions within Hope into Action will require an enhanced DBS check which will need to be conducted prior to undertaking the role. References will be requested after a provisional offer is made. Any start date will be subject to the references having been received and checked.

For further information please go to OUR WEBSITE.

Please advise Head Office if you need this form in an alternative format.

PRIVACY NOTICE FOR APPLICANTS

Why we collect and use your data

The information you provide when applying for a post here / agreeing to work here will be used in the following ways:

- To recruit and appoint our staff
- To support and manage our staff and to discharge our contractual obligations
- To maintain our accounts and records, including payroll
- To manage our activities

To fulfil our legal obligations, including checking your right to work and engaging with HMRC over income tax and national insurance

If you are not willing to provide all the information requested, we will be unable to process your application.

How we will hold and take care of your Information

- in considering my application, Hope into Action will treat the information given in this form in confidence;
- not disclose information to any third party without my prior agreement;

I understand my right to request to see all the information held about me on any record at Hope into Action. It is our policy to retain details of all unsuccessful applicants for positions at Hope into Action for six months from the date of the advertisement. If you do not wish us to retain your details in this way, please let us know and we will dispose of your application form. Should you be successful in your application, the information provided, and further information which will be gathered at the relevant time, will be subsequently used for the administration of your employment and in relation to any legal challenge which may be made regarding our recruitment practices.

APPLICATION FORM



IN CONFIDENCE

The first section of this form contains all your personal and referee details. The second part of the form will be used for shortlisting and in your interview.

SECTION 1

1.1. Job Details							
Post Applied for							
Location							
Date of application							
1.2. Personal Details							
Title (Mr / Mrs / Miss / I	Vs / Other)						
First name(s)							
Surname or family name)						
Home address							
Postcode							
Email address							
Home telephone							
Mobile telephone							
National Insurance Num	ber						
Please indicate your pre	ferred metho	d(s) of co	ntact				
Postal Address	Teleph	one		Mobile		Email	
	Eligibility to work in the UK: To comply with legislation, all candidates must provide documentary evidence of their right to work in the United Kingdom. Are you legally permitted to work in the UK?						
Do you hold a current U	K driving licer	nce?		Yes /	No		
Groups				103 /			
•							
Expiry date	/:f	:					
Details of endorsements "N/A")	(if none, piea	ase insert					
				T			
If appointed, how soon of	ould you take	e up the p	ost?				
How did you find out about	out this vacan	icy?					

1.3. REFERENCES

Please give the name and addresses of two people who have supervised you in a professional capacity who may be consulted regarding your suitability for this post. One reference should be your present or most recent employer. Please also provide one character reference. References should cover the current and preceding 5 year period. If you were known by a different name, please also state this.

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Full Name:	
Position:	
Company:	
Address:	
Postcode:	
Telephone No:	
Email Address:	
In what capacity does this person know you?	
May we contact them before interview?	No / Yes anytime / Yes, after shortlisting / Other, please state

Referee 2

Full Name:	
Position:	
Company:	
Address:	
Postcode:	
Telephone No:	
Email Address:	
In what capacity does	
this person know you?	
May we contact them before interview?	No / Yes anytime / Yes, after shortlisting / Other, please state

Referee 3

Full Name:	
Position:	
Company:	
Address:	
Postcode:	
Telephone No:	
Email Address:	
In what capacity does	
this person know you?	
May we contact them	No / Yes anytime / Yes, after shortlisting / Other, please state
before interview?	

1.4. CRIMINAL RECORDS

For all tenant facing positions we require you to complete an Enhanced DBS check. For most other roles a Basic DBS check will be required.

Having a criminal record however will not necessarily bar you from working with Hope into Action but this will depend on the nature of the opportunity sought and the circumstances and background of the offence.

For more details an informal chat or to have any queries you may have answered, please contact admin

If you do not consent to these checks being carried out, we will unfortunately be unable to proceed with your application.

Delete as appropriate

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Do you have any unspent criminal convictions?	Yes	No
Are you prepared to complete the self-declaration and DBS check?	Yes	No

SELF DECLARATION

To be completed by all applicants.

Signature:	Date:	
a medical report (if required and only in line with the operatio	n of the Equality Act 2010).	
checks including references, eligibility to work in the UK, criminal convictions, probationary period and		
offer of employment is subject to the Company being satis		
information will give my employer the right to terminate any e		
I confirm that the information in this form is complete and of	,	

SECTION 2

2.1. EDUCATION, TRAINING AND DEVELOPMENT

Please list your training and education experience, starting with the most recent and include any other relevant personal development you have undertaken.

Dates (From > To)	Name of Education Provider and Course Name	Qualification/ Grade Attainment

EMPLOYMENT HISTORY

Please state all the paid or unpaid work you have undertaken and please account for any gaps there may be. Please continue a separate sheet stating clearly which section of the form you are continuing and include your name.

What is your current occupation?					
Employed		Retired		Unemployed	
Self Employed		Student		Other	

2.2. RECENT EMPLOYMENT HISTORY

PRESENT OR LAST EMPLOYER		
Employer's name and address		
Post Held		
Date commenced		
Date left, if applicable		
Give reason for leaving		
Please give a brief description of your duties and responsibilities (continue on additional sheet if necessary)		

2.3 PREVIOUS EMPLOYMENT HISTORY

Please state all the paid or unpaid work you have undertaken and please account for any gaps there may be. Please continue a separate sheet if needed, stating clearly which section of the form you are continuing and include your name.

Dates (month-year, from-to)	Employer's Name and Address	Duties and resposibilities	Reason for leaving
			T
			+
			+
			+
			+
Please give de employment.	etails of any relevant sk (E.g. through volun	xills/experience you may have ga tary service).	ined outside
Please note he	ere any other employr	ment that you would continue wi	th if you were to
be successful	in obtaining this role:	:	-
	ONAL STATEMENT is supplied with all applica	tions containing information on the ma	in requirements
of the role, along v	with the essential and desir	able qualities of the individual(s) workir	ng in that role(s).
Please provide, ir	n the box below, a written	statement evidencing your suitability to	
on your qualities t	o match the role.		

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2.5 PERSONAL STA	TEMENT			
Please outline the de	evelopment of your fa	aith in the space belo	w:	
Troubo Galinio di G	ovolopinone or your n	arar iir aro opado boro.	···	