

Application Form

You must complete all sections of the Application Form in black ink or electronically. We will use this form to help us decide on your suitability for the post so please make sure it is accurate and complete. Curriculum Vitae will not be accepted. Guidance Notes are included to help you complete this form.

Position applied for:		Closing date:			
Where did you first learn of	this vacancy?				
If existing Restorative employee please include their name:					
I'm applying to work in: Re	esidential Care (8-17years)	Supported Accommodation	n (15-19 years) 🗌		

Personal Details & Contact Details

Title:	Surname:	Forenames (in full):			
Please also pro (if applicable)	ovide details of any former names				
Home Address	::	Daytime Telephone No:			
inc Post Code		Evening Telephone No:			
		Mobile No:			
E-mail:		National Insurance No:			
Do you have a full UK driving license with access to a vehicle and the ability to add business Insurance for the role?					

Address History (please include last five years)

You will be asked to provide a certificate of good conduct if you have previously lived in another country.

Address:	From / to:	
Address:	From / to:	

Entitlement to work in the UK

All applicants will be asked at interview to provide documentary evidence of their right to work in the UK

Do you have any res	strictions that	apply to you?
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YES	NO

*If yes – please give details of any restrictions:

1. References

Please provide details of two referees who can comment on your suitability for this post. The referee must be a line manager or supervisor. References from relatives or people who only know you as a friend are not acceptable. If you do not wish us to contact a referee prior to interview, then please tick the appropriate box and use a separate sheet to explain why. If you have not worked previously, then please give details of a school/college/university official.

Restorative SCS may also go further back to request references, if you have had employment with other Social Care Providers including Children's or Adults. The references will be requested using the companies standard reference request form.

Referee 1 (current	or most recent employer)	Referee 2	
Name:		Name:	
Relationship to ap	plicant:	Relationship to ap	plicant:
Position:		Position:	
Employer/Univers	ity/College Name:	Employer/Univers	ity/College Name:
Address:		Address:	
Post Code:		Post Code:	
Telephone No:		Telephone No:	
E-mail:		E-mail:	

2. Current Employment (or last employment if not currently employed)

Your Post Title:	Employer Name:	
Employer Address:		
Start date (dd/mm/yyyy):	End date (dd/mm/yyyy): (if applicable)	
Please give a brief description of current duties, responsibilities and achievements:		
Reason for leaving this post:		
What is your contractual period of notice?	Current Salary:	

3. Previous Employment

(Please list all your employment history and continue on an additional sheet if necessary.) To meet The Children's Homes (England) Regulations 2015, if you have previously worked in a position involving work with children or vulnerable adults, we will contact these companies to verify of the reason why the employment or position ended. Failure to provide a full history may delay the start of your employment or result in an offer of employment being withdrawn.

Name and address of Employer	Job Title	Start Date (dd/mm/yyyy)	End Date (dd/mm/yyyy)	Reason for leaving

4. Gaps in Employment

Please indicate and explain any gaps in employment since first leaving secondary education. Include specific dates and be sure to account for all gaps, whatever their length.

Start Date (dd/mm/yyyy)	End Date (dd/mm/yyyy)	Reason for gap

5. Education

If the post requires a particular qualification, you will be asked to produce original evidence at your interview if short-listed.

Secondary and Further Education (please list in chronological order and start / finish dates mm/yyyy)	Level	Subjects	Grade/Result	Year Obtained (yyyy)

Other training and development (including professional, vocational or job related training)

Title and brief description of course	Date

Membership of Professional Associations or Statutory Body

Organisation Name	Level of Membership/Role/Registration No. (if applicable)	Registration Date			
Are you subject to any conditions or prohibitions placed on you by any statutory body in the UK. *If Yes – please provide details in a sealed envelope and attach with this form *YES NO					

6. Reasons for applying for this post

Restorative SCS – Application Form

This section is the most vital part of the form. We need you to give us specific information to support your application so that we can short-list in a fair and unbiased way. We recommend that you provide as much evidence as possible to show how your skills, abilities, knowledge and experience meet the selection criteria in the post description and person specification (where provided). These documents describe the essential experience and knowledge required for the post and may include competencies required. Please provide examples which relate directly to the post you are applying for:

7. Additional Information Restorative SCS – Application Form Please confirm whether this will be your only employment? YES *NO * If no, provide details including days and hours worked and whether full- or part-time: Have you been the subject of a formal disciplinary sanction or are you in the process of ongoing disciplinary proceedings in your current employment? *YES NO Have you been dismissed from any previous employment? NO *YES * If yes, please indicate which employment and specify the reasons for your disciplinary / dismissal (use a separate sheet if necessary): If you are short-listed for interview the panel will discuss this with you and your current or previous employers. Please note the following: If you are related to anyone in this organisation please provide details (refer to notes below):

A) Enhanced DBS Check:

All posts defined as "regulated activity" are subject to an Enhanced DBS check so that any criminal background (including "spent" convictions, bind-over orders or cautions) is disclosed to the organisation. We cannot employ someone to this post without this check. If you are successful in applying for this post we will ask the DBS for a Disclosure.

The position for which you are applying involves contact with vulnerable groups. It is exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England and Wales). For this position you are not entitled to withhold information about police cautions, bind-overs, or any criminal convictions that would otherwise have been considered "spent" under the Act.

Have you ever been convicted of any offence, been bound-over, or given a caution? (see notes above)	*YES	NO
*If yes, please give details in the space provided below. The information you provide will be treated in confidence.		
Are you currently the subject of any police investigations following allegations made against you?	YES	NO
*If yes, please give details in the space provided below. The information you provide will be treated in confidence.		

B) Safeguarding Declaration:

I declare that the information I have given on this form is complete and accurate and that:

- I am not barred or disqualified from working with vulnerable groups, children or young people
- I am not subject to any sanctions or conditions on my employment imposed by the Independent Safeguarding Authority, Secretary of State or other regulatory body

Print Name:	Date:	

By ticking this box I agree that all information provided is true and correct.

• the withd	that to knowingly give false information or to leave out rawal of any offer of appointment, or ssal at any time in the future, and possible criminal pro	5	ant information could result in:
Print Name:		Date:	
By tick	ring this box I agree that all information provided is true	e and corr	ect.

Availability:

Are there any dates when you are not available for interview? Please state below:

PLEASE RETURN THIS FORM TO: recruitment@restorative-scs.co.uk

Restorative Social care Services,
69A Saddleworth Road,
Greetland,
Halifax,
West Yorkshire,
HX4 8AG

Data Protection

In accordance with the General Data Protection Regulations 2018 (GDPR), this organisation will only use the information given on this application form to determine your suitability for this post and to monitor equal opportunities. We will keep application forms of unsuccessful candidates for six months before being destroyed. **Personal Details**

EQUAL OPPORTUNITIES MONITORING FORM - IS SECTION TO BE COMPLETED BY ALL APPLICANTS

(this form will not be used as part of any selection process)

Please help Restorative Social Care Services prevent unfair discrimination by answering ALL of the following questions and ticking the appropriate box. This information will be treated in the strictest confidence and only used to enable us to monitor our performance as an equal opportunities employer. It will not be seen or used by anyone involved in selecting candidates for interview.

Post Title:	
First name(s):	Surname:
Date of Birth:	Male: Female:

Ethnic Origin/Nationality: My Ethnic Origin is:					
White	Mixed	Asian	Black	Other	
01 British	21 Black and White Caribbean	41 Indian or British Indian	61 Caribbean	81 Chinese	
02 Irish	22 Black and White African	42 Pakistani, British Pakistani	62 African	85 Any Other	
19 Other White	27 Chinese and White	43 Bangladeshi, British Bangladeshi	63 Other Black or Black British	99 Prefer not to say	
	28 Any other mixed background	44 Other Asian, British Asian			
Sexual Orientation:					
Bisexual	Gay	Heterosexual	Lesbian	Prefer not to say	
Religion (please tick one box only; categories determined by Office of Population Census and Surveys)					
Christian	Buddhist	Hindu	Jewish	Muslim	
Sikh	All other religions, beliefs or faiths	No religion	Prefer not to say		

Disability:

The Disability Discrimination Act defines disability as a physical or mental impairment which has a substantial and long term adverse effect on his/her ability to carry out normal day to day activities.

Do you consider yourself to be disabled?	*YES NO
*If yes, please give details in the space provided below. The information you provide will be treated in confidence.	
If you are disabled, are there any arrangements we can make for you at interview (e.g. ground floor ve loop, sign language interpreter, audio tape or other adjustments).	enue, hearing
Please detail requirements:	

We will interview all disabled applicants who meet the minimum (i.e. essential) criteria for a post vacancy and consider them on their skills and experience. Please sign here if you are happy for your details to be passed to the interviewing manager so that you can be considered under the two ticks scheme.

Print Name:

Date:

By ticking this box I agree that all information provided is true and correct.

It would also help us to know any barriers you have faced when dealing with us and we would be grateful if you would also use this space to make suggestions on how we can improve our services.

Has applicant completed self-disclosure form?	YES	NO
Has applicant provided 2 references?	YES	NO
Is one reference from most recent employer?	YES	NO
Is employment history fully complete and without any gaps?	YES	NO
Is National Insurance number provided?	YES	NO

If answered No to any of the above, refer back to applicant before progressing to interview

Any queries to be addressed at interview stage
1.
2.
3.
4.
5.