THE FATHERHOOD PROJECT

Job Application Form

PERSONAL DETAILS

Full Name:

Date of Birth:

Age:

Address Line 1:

Address Line 2:

City:

County:

Postcode:

Telephone Number:

Mobile Number:

Email Address:

National Insurance Number:

Position Applied For:

How did you hear about this role?:

EMPLOYMENT GAP

Please explain any gaps in your employment history, including reasons for being out of work and what you were doing during that time:

EMPLOYMENT HISTORY

Please list your employment history starting with the most recent. Include voluntary work.

Employer 1

Employer Name:

Job Title:

Dates (From - To):

Key Responsibilities:

Reason for Leaving:

Employer 2

Employer Name:

Job Title:

Dates (From - To):

Key Responsibilities:

Reason for Leaving:

EDUCATION & QUALIFICATIONS

Please list your qualifications, starting with the most recent:

School/College/University:

Dates Attended:

Qualifications Gained:

School/College/University:

Dates Attended:

Qualifications Gained:

SKILLS & ADDITIONAL INFORMATION

Do you hold a full UK driving licence? Yes ☐ No ☐

Languages spoken:

Relevant skills or training:

IT skills:

HEALTH DECLARATION

Do you have any health conditions or disabilities that may affect your ability to carry out the duties of this role?

Yes ☐ No ☐

If yes, please provide details:

CRIMINAL BACKGROUND DECLARATION

Do you have any unspent criminal convictions, cautions, reprimands or final warnings under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975?

Yes ☐ No ☐

If yes, please provide details below (including offence, date, and sentence received):

A criminal record will not necessarily prevent you from being offered a position. Each case will be assessed individually.

PROFESSIONAL REFERENCES

Please provide two professional references. These should not be family members.

Reference 1

Full Name:

Job Title:

Company/Organisation:

Address:

Telephone:

Email:

Relationship to Applicant:

Reference 2

Full Name:

Job Title:

Company/Organisation:

Address:

Telephone:

Email:

Relationship to Applicant:

I declare that the information provided in this application is true and complete to the best of my knowledge.

Signature: Date:

SAFEGUARDING DECLARATION

The Fatherhood Project is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults. All applicants must be willing to undergo safeguarding screening appropriate to the role.

Have you ever worked with children or vulnerable adults?

Yes ☐ No ☐

If yes, please provide details of the role(s):

Have you ever had an allegation made against you regarding the safety or welfare of a child or vulnerable adult?

Yes ☐ No ☐

If yes, please provide details:

Have you ever been dismissed from a role involving children or vulnerable adults?

Yes ☐ No ☐

Are you on the DBS Barred List or have you ever been disqualified from working with children?

Yes ☐ No ☐

DISCLOSURE & BARRING SERVICE (DBS) CONSENT

This post is exempt from the Rehabilitation of Offenders Act 1974 and therefore requires a Disclosure & Barring Service (DBS) check. The level of check required for this role is:

Enhanced DBS Check ☐ Enhanced DBS with Barred List Check ☐

Do you have an existing DBS certificate?

Yes ☐ No ☐

DBS Certificate Number (if applicable):

Date of Issue:

Are you registered with the DBS Update Service?

Yes ☐ No ☐

I consent to a Disclosure & Barring Service check being carried out if I am offered this position. I understand that any offer of employment is subject to a satisfactory DBS check.

Signature: Date:

RIGHT TO WORK IN THE UK

Do you have the right to work in the UK?

Yes ☐ No ☐

If yes, please state your visa/immigration status:

Do you require a work permit?

Yes ☐ No ☐

EMERGENCY CONTACT

Full Name:

Relationship:

Address:

Telephone Number:

Mobile Number:

EQUAL OPPORTUNITIES MONITORING

The Fatherhood Project is committed to equal opportunities. This information is used for monitoring purposes only and will not affect your application.

Gender:

Ethnicity:

Religion or Belief:

Sexual Orientation:

Do you consider yourself to have a disability? Yes ☐ No ☐

If yes, please provide details:

DATA PROTECTION CONSENT

In accordance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018, the information you provide on this form will be used solely for the purposes of recruitment and, if successful, your personnel file. Your data will be stored securely and will not be shared with third parties without your consent, except where required by law.

I consent to The Fatherhood Project processing my personal data as described above.

Yes ☐ No ☐

Signature: _____ Date: _____