



“Embracing Disability, Empowering Lives”

SoLO Life Opportunities

38 Walnut Close,
Chelmsley Wood,
Solihull, B37 7PU

STAFF APPLICATION FORM

Here at SoLO, we take your privacy very seriously, and we will only use the data collected on this form to enable us to deliver a safe and high-quality service. The information will be shared only on a need to know basis and with your permission. Your data will be stored in password protected systems or secure storage. If at any time you wish to withdraw your consent for us to hold this data, you may do so by contacting us either by phone, email or letter.

Name

Address &
postcode

Telephone
number:

Mobile

Email:

Car driver
Business Insurance

POSITION (S) APPLIED FOR

Where did you learn about this vacancy?

1. EDUCATION

Date	Details of establishment attended

2. QUALIFICATIONS (please show most recent first)

Date	Details of qualification gained	Grade achieved

3. PREVIOUS EMPLOYMENT (please show most recent first)

Date	Name and address of employer	Details of position	Reason for leaving

**4. RELEVANT TRAINING COURSES ATTENDED (i.e. first aid, childcare etc.
(please show most recent first)**

Date	Details

5. EVIDENCE OF HOW YOU MEET THE PERSON SPECIFICATION

Please use the job profile to complete this part of the application form. It is important to give examples of when you have demonstrated that you meet the criteria for each of the key accountabilities and the 'need to do/know/be' areas of the job profile. The job profile for this role is available on our website at <http://www.solihullsolo.org/jobs-2/>
Please continue on additional sheet(s)

--

6. REFEREES (references are followed up after interview)

Please provide the names, addresses and email details of two people (not relatives) who know you well and to whom a reference request can be made.

Please note: One reference should be from a current or most recent employer, which should come from a business email address, be on company headed paper or with a company stamp. In the case of a personal reference, they should have known you for at least 12 months.

Name

Name

Address

Address

Tel No/email

Tel No/email

How do they know you?

How do they know you?

7. VOLUNTARY EXPERIENCE – please give details of any relevant experience with dates and times.

Name of organisation	Role within organisation	Dates

8. Please give us details of any health problems that you think we should be aware of.

9. Have you been convicted of any criminal offence at any time?

YES NO

Have you been the subject of abuse investigations or enquiries?

YES NO

If yes to either question, please give details including otherwise 'spent' convictions as required by the Rehabilitation of Offenders Act (exceptions, order 1975). (You may provide this information, under separate cover, marked private and confidential, if you would prefer it to be discussed in the event that you are selected for interview.)

NB Having a criminal record will not necessarily stop you from being a worker/volunteer, but we are required to carry out a DBS disclosure, before appointment on anyone who will have direct contact with vulnerable adults or children. This procedure adheres to the 'DBS code of practice' a copy of which is available on request.

10. Do you have the right to work within the UK?

YES NO

The information given in this form is correct to the best of my knowledge and belief:

Signature.....

Date

Please return this form to:

SoLO Life Opportunities
Job Applications
38 Walnut Close
Chelmsley Wood
Birmingham
B37 7PU

Staff Equal Opportunities Monitoring Form

This Information will be kept solely for monitoring purposes

Gender

Male Female

<input type="checkbox"/>	White British	<input type="checkbox"/>	Indian
<input type="checkbox"/>	White-Irish	<input type="checkbox"/>	Pakistani
<input type="checkbox"/>	White-Other*	<input type="checkbox"/>	Bangladeshi
<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Asian-Other*
<input type="checkbox"/>	Mixed White/Black Caribbean	<input type="checkbox"/>	Black Caribbean
<input type="checkbox"/>	Mixed White/Black African	<input type="checkbox"/>	Black African
<input type="checkbox"/>	Mixed White/Asian	<input type="checkbox"/>	Black Other*
<input type="checkbox"/>	Mixed Other*	<input type="checkbox"/>	Other*

*Please Specify: _____

The Disability Discrimination Act states that disability can be physical, sensory or mental and includes conditions such as epilepsy and diabetes which are controlled by prescribed medication. It must be substantial and have a long-term effect (that means the disability must last or be expected to last for 12 months)

Do you feel you have a disability under this definition?

Yes No

Statement of Requirement for Disclosure and Barring Service

Disclosure of Criminal Convictions – DBS check

As this post involves working with children/vulnerable adults it is subject to a criminal record check.

Candidates

The candidate will be asked to complete and sign a Disclosure Application Form and provide evidence of identification. The Disclosure Form will be checked under the procedures of the Criminal Records Bureau and you will be issued with a copy of a certificate advising of the outcome.

Code of Practice on the use of disclosure information

The Code of Practice is intended to ensure that the information released will be used fairly and to ensure that sensitive personal information is handled and stored appropriately. If the Disclosure reveals a criminal history, where appropriate it will be discussed with the candidate before an appointment decision is made, but the fact that a person has a criminal record does not automatically render him or her unsuitable for work with children/vulnerable adults. A person's suitability will be looked at as a whole in the light of all the information available.

GDPR (General Data Protection Regulation)

Due to the changes within data protection giving people back control of their personal data we need to ensure you have read and understand the privacy policy concerned.

Before we can process your DBS you will need to have read the privacy policy via the link below

<https://www.gov.uk/government/publications/dbs-privacy-policies>.

I have the read the Standard/Enhanced check Privacy Policy for applicants and I understand how DBS will process my personal data and the options available to me for submitting my application.

Sign: _____

Date: _____