**Bwrdd Cyllid Esgobaeth Tyddewi St Davids Diocesan Board of Finance**

Swyddfa’r Esgobaeth Diocesan Office

Abergwili, Caerfyrddin SA31 2JG Abergwili, Carmarthen SA31 2JG

Ffôn / Tel 01267 236145 Ffacs / Fax 01267 234754

Ebost / Email: Diocese.stdavids@churchinwales.org.uk

Ysgrifennydd yr Esgobaeth **Howard Llewellyn** Diocesan Secretary



### JOB APPLICATION FORM

|  |  |
| --- | --- |
| **Post of**  Internal use only  Candidate’s Ref No:  Received:…………………..………. | **Diocesan Churches Inspector** |
| **Based** | **Diocesan Office, Abergwili, Carmarthen** |
| **Post ref** |  |
| **Closing Date** | **16 April 2021** |

|  |
| --- |
| **PERSONAL DETAILS** |
| Surname Title  Forenames |
| Address      Post Code Tel No. Home  Mobile E-mail address Are you a British subject or a national of any EU Country YES □ NO □ If not, do you have the right to work in the UK and/or if necessary have a current work permit/visa YES □ NO □ If so, please state the expiry date of your right to work in the UK and/or your work permit/visa.    Nationality National Insurance No Dates you are NOT available for interview |

Equal Opportunities Monitoring Form

In accordance with its equal opportunities statement, the Organisation will provide equal opportunities to all employees and job applicants and will not discriminate either directly or indirectly on the grounds of race, colour, ethnic origin, nationality, national origin, sex, marital status, disability, sexual orientation, religion or age.

You may of course, decide not to answer one or any of these questions but if you do respond, all information will be treated in confidence and will be used solely by the Human Resources Department for the purpose of providing statistics for equal opportunity monitoring. The front page and monitoring form does not form part of your application and will therefore be detached from it on receipt and stored separately.

Thank you for your assistance in completing this form

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Gender**: Male □ Female □ **Date of Birth** **Age**: | | | | |
| **Marital Status *(please tick appropriate)***  Married □ Divorced □ Separated □ Single □ Partnered □ | | | | |
| **Race, Nationality, Ethnic Origin** *(Please Tick as appropriate)* | | | | |
| *White*  Welsh □ English □ Irish □ Scottish □Other white background (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | *Mixed*  White and Black Caribbean □ White and Asian □  White and Black British □ White and Black African □  Other mixed background (please specify)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| *Asian*  Indian □ Pakistani □  Bangladeshi □ British □  Other Asian background (please specify)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | *Black*  Caribbean □ African □  British □  Other black background (please specify)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **Sexual Orientation** *(Please tick as appropriate)*  Heterosexual □ Homosexual □ Bisexual □Transsexual □ Prefer not to say □ | | | | |
| **Religion**  Please state preferred religion or belief | | | | |
| **Disability**  None □ Physical Disability □ Mental Disability □ Prefer not to say □  If you are disabled please give brief details of the effects of your disability on your day-to-day activities, and any other information that you feel would help us accommodate your needs during your interview/assessment and thus meet our obligations under the Equality Act 2010: | | | | |
| **Welsh Language**  Are you a Welsh speaker Yes □ No □ | | | | |
| Where did you see the advertisement for this post? At a Facility □ Local Press □ Internet □  Job Centre □ Professional Publication □ Word of Mouth □ | | | |
| REFERENCES | | |
| Please supply the names, addresses, telephone numbers and email addresses of two referees, one of which must be your present employer. If you are not currently in employment, please include your last employer. You should note that any of your previous employers may be contacted for a reference.  **UNLESS YOU INDICATE TO THE CONTRARY, REFERENCES WILL BE REQUESTED FOR SHORTLISTED CANDIDATES PRIOR TO INTERVIEW**. | | |
| Name:  Post:  Address:      Post Code:  Tel No:  E-mail: | | Name:  Post:  Address:      Post Code:  Tel No:  E-*m*ail: |

|  |
| --- |
| **CONVICTIONS** |
| Have you ever been convicted of a criminal offence? If so please give details of any unspent convictions.  Spent convictions do not have to be declared as the job is not one covered by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. |
|  |

|  |
| --- |
| **DECLARATION** |
| **I declare that the information set out in this application form is true in all respects and I understand that if it is subsequently discovered that any statement is false or misleading, or that I have withheld relevant information, my application may be disqualified or if I have already been appointed, I may be dismissed. I am also aware that canvassing of Members OR Employees of the St Davids Diocesan Board of Finance will disqualify me.**  **I hereby give my consent to the Organisation processing the data supplied on this application form for the purpose of recruitment and selection.**  **Signed**  **Date** |
| **Data Protection Act 1998 – Information provided by you will be held and automatically processed as data on a computer system. The Trust will take all reasonable precautions to ensure its confidentiality and to comply with the principles contained in the Act.** |

**What training, qualifications or skills do you have relevant to this post?** Please provide details below**.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EDUCATIONAL / PROFESSIONAL / VOCATIONAL QUALIFICATIONS OBTAINED** | | | | |
| Dates | | Where obtained School/ College/ University/ Workplace etc | Qualifications Gained | Grade/  Level |
| From Mth/Yr | To  Mth/Yr |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **CURRENT MEMBERSHIP OF PROFESSIONAL BODIES** | | | |
| Name of Body | Grade of Membership | Date of Admission | How did you achieve this membership? |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **ARE YOU UNDERTAKING ANY COURSE OF STUDY AT PRESENT? (If so please give details)** | | | |
| Date | Training Course Title | Duration  of course | Organising Body |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **TRAINING RECEIVED** *During the past 3 years.* | | | |
| Date | Training Course Title | Duration  of course | Organising Body |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **IT IS COMPANY POLICY TO VERIFY THE QUALIFICATIONS OF ALL SUCCESSFUL JOB APPLICANTS AND YOU MAY BE ASKED AT A LATER STAGE IN THE RECRUITMENT PROCESS FOR YOUR CONSENT TO CHECKS BEING CARRIED OUT** | | | |
|  | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **EMPLOYMENT HISTORY - Present or most recent employment** (This may be paid or unpaid) | | | | | |
| **Job Title: - Salary: -**  **Name and address of present or most recent employer: -**      **Start date Date left**  **with this employer: - ( if appropriate)**  **Reason for leaving**  **Brief description of job and main duties** | | | | | |
| **Notice required by Present Employer: -** | | | | | |
| **Previous Employment History**  Please give details of your last 3 jobs, most recent first. Any relevant posts held before then may also be mentioned. This can include any unpaid or voluntary work you may have undertaken.  Any dismissal or redundancy must be clearly stated. **(*Please use a separate sheet if required*).** | | | | | |
| Dates | | Employer/Self Employed  Please include name and address | Post Held and  Main Responsibilities | salary | Reason for Leaving |
| From Mth/Yr | To  Mth/Yr |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |
| --- |
| Additional Information |
| Please give details of time not accounted for elsewhere on this application form. |
| Do you hold a current United Kingdom driving licence? Yes □ No □ Do you have use of a car? Yes □ No □ If “Yes” do you have any current endorsements |
| Have you ever been convicted of a criminal offence? Yes □ No □  If YES, provide details below of any unspent or pending convictions under the Rehabilitation of Offenders Act 1974  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you currently have any other employment other than your main job? Yes □ No □  If ‘Yes’, please provide details below: Post: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hours worked per week: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **YOUR EXPERIENCES AND ACHIEVEMENTS**  *Please use this space to say why you are interested in the post for which you have applied and provide any other information that may assist your application, with specific reference to the job specification.* |
|  |

*If necessary, an additional A4 sheet may be attached*

To be completed and returned to:

The Diocesan Secretary St Davids Diocesan Board of Finance, Abergwili,

Carmarthen SA31 2JG or by email to [diocese.stdavids@churchinwales.org.uk](mailto:diocese.stdavids@churchinwales.org.uk)