

Railway Housing Association



**Application for
EMPLOYMENT**

Office use only

Application Ref. No. _____

Private and Confidential

For the purposes of Data Protection please note that the personal information supplied by you on this form will only be used for recruitment purposes and will not be disclosed to any third party.

The information given will form part of the confidential personal record of the successful candidate.

All application forms will be retained for a period of eight months.

Please do not submit CV's as they will not be considered.

In the interest of economy, applications will not be acknowledged unless a stamped addressed envelope is enclosed with your application. If you have not been contacted within four weeks of the closing date please assume that your application has been unsuccessful.

Post applied for:

Present or most recent employment

Name and address of employer _____

Job title _____

Date started _____ Date left (if applicable) _____

Salary _____

Brief details of duties _____

Reason for leaving _____

Notice period required _____

References

Please give details of two people we may approach for references, one of whom must be your current or most recent employer.

Name _____ Name _____

Address _____ Address _____

Postcode _____ Postcode _____

Email _____ Email _____

Contact no. _____ Contact no. _____

Relationship _____ Relationship _____

May we contact prior to interview? YES/NO

May we contact prior to interview? YES/NO

Employment History

Please give details of your previous employment, most recent first.

Employer	Job Title	Salary	Dates employed	Reason for leaving

Professional Bodies

If you are a member of any professional bodies, please give details below.

Criminal Records

Do you have any criminal convictions except those 'spent' under the Rehabilitation of Offenders Act 1974?
YES/NO (if yes, please give details)

Declaration (please read the following statements carefully before signing this application form)

1. I declare that the information on this application is correct and complete to the best of my knowledge and I understand that providing false information may lead to withdrawal of an offer of appointment or dismissal without notice if I have already been appointed.
2. I agree that the Association reserves the right to request a medical report (with my permission) and that any offer of employment may be subject to such a report.
3. I understand that the canvassing of employees or Board Members of the Association will result in disqualification of this application.
4. Are there any restrictions on you taking up employment in the United Kingdom? YES/NO
(If yes, please provide details)

Signed:

Date:

Please return the completed application form to:

**Railway Housing Association, Bank Top House,
Garbutt Square,
Neasham Road, Darlington DL1 4DR**
Telephone: 01325 482125
Fax: 01325 384641

Office use only

Application Ref. No.

Equal Opportunities Monitoring Form

Railway Housing Association is an equal opportunity employer and welcomes applications from all sections of the community. Individuals are always appointed based on their relevant skills and experience.

In order to ensure our policies and procedures are fair and effective we require the following information which will be used for monitoring purposes only:-

Ethnic and National Origin

White: British Irish Other
Mixed: White & Black Caribbean White & Black Asian White & Asian Other
Asian or Asian British: Indian Pakistani Bangladeshi Other
Black or Black British: Caribbean African Other
Chinese or other ethnic group: Chinese Other

Disability

Do you consider yourself to have a disability as defined under the Equality Act 2010 as detailed below:
'a physical or mental impairment which has a substantial and long term adverse effect on your ability to carry out normal day to day activities'

n.b. Under the Equality Act 2010 impairment now covers long term medical conditions such as asthma and diabetes, rheumatoid arthritis and motor neurone disease; mental health conditions such as bipolar disorder or depression, learning difficulties and disabilities.'

YES / NO (if yes please give brief details)

Do you have any specific requirements relating to your disability to enable you to attend an interview - access to premises, travelling arrangements, timing of the interview, type of interview, induction loop etc?

YES / NO (if yes please give details)

Vacancy

Please can you let us know where you saw the vacancy advertised?

Personal Details

Surname _____ Forename(s) _____

Date of Birth _____ Gender: Male/Female/Transgender _____

Home Address _____

Post Code _____

Email Address _____

Home telephone _____ Mobile telephone number _____

Work telephone _____ May we contact you at work? YES/NO

Do you have a current driving licence? YES/NO

If you are closely connected to any member of the Board or staff of the Association please state his/her name below, detailing the relationship. Closely connected is defined as spouse, partner, relative or close friend.

Signed: _____

Date: _____

This information will not be circulated to the selection panel, but will form part of the personal confidential record of the successful applicant.

Information can be made available in other languages, or other formats such as Braille or Audio Tape, on request. Please ask a member of our staff for more information, or if you need any other help or advice. (They can arrange to speak to you in your own language if you need them to.)

L'information peut être rendue disponible dans d'autres langues, ou en d'autres formats tels que braille ou bande magnétique audio, sur demande. Veuillez demander à un membre de notre personnel pour plus d'information, ou si vous avez besoin de tout autre aide ou conseil. (ils peuvent organiser de vous parler en votre propre langue si vous avez besoin qu'ils le fassent.)

Bilgiler istenildi_inde di_er dillerde de temin edilebilir ayrıca görme özürülülerin kullanabilece_i kabartma alfabesiyle veya Teyp kaseti _eklinde de hazırlanabilir. Daha fazla bilgi için veya herhangi bir konuda yardım ve tavsiye ye ihtiyacınız varsa lütfen görevli personelden birisiyle konu_unuz. (E_er ihtiyacınız varsa personelimiz sizinle kendi dilinizde konu_abilmek için bir tercüman_ayarlayabilir).

نستطيع توفير المعلومات بلغات اخرى وصيغ اخرى مثل البريل (لفاقدي البصر) والترانظ الصوتية، حسب الطلب. يرجى الاستفسار من احد موظفينا للحصول على المزيد من المعلومات او للحصول على المساعدة او الارشاد. (يستطيع موظفونا توفير وسائل اخرى للتحدث معكم بلغتكم اذا احتجتكم الى ذلك.)

该资料已被翻译为其它的语言，也有诸如盲文或录音磁带的其它形式供选。请询问我们的职员以便获得进一步的资料，其它帮助或建议。(如果你有需要，他们可以安排用你自己的语言来和你交谈。)

در صورت درخواست، اطلاعات به زبانهای دیگر در دسترس قرار خواهد گرفت و یا به هر شکل دیگر از قبیل خط برجسته و یا صدا. جهت دریافت اطلاعات بیشتر و یا دریافت راهنمایی و کمک، لطفاً از یک کارمند سوال کنید. (آنها میتوانند ترتیبی بدهند که در صورت لزوم با زبان خودتان یا شما صحبت کنند.)

زانیاریانہ بہ زمانی خوتان دست دہ کہ ویت، و یا بہ شیوہ کاتی دیکہ، لہ وانہ بہ خہ تی گہ ورہ و یا بہ نہ نگ. نہ گہ ر پیویستت بہ زانیاری، زورتر، یارمہ تی و یا نامورنگاری. ہہ یہ، تکلیہ پرسبار بکہ لہ یہ کیک لہ کارمہ نہ کان. (نہ وان کاریکی و ا دہ کہ ن کہ بہ زمانی خوت لہ گہ لتا قسہ بکہ ن.)

ਬੈਠੜੀ ਕਰਨ ਤੇ, ਸਾਡਾਕਾਰੀ ਸੁਸਰੀਆਂ ਬੈਠੀਆਂ, ਜਾਂ ਹੋਰ ਰੂਪਾਂ ਵਿੱਚੋਂ ਕਿ ਚਰੇਲ ਜਾਂ ਆਡੀਓ ਟੇਪ ਤੇ ਵੀ ਵਿੱਡੀ ਜਾ ਸਕਦੀ ਹੈ। ਹੋਰ ਜਾਣਕਾਰੀ ਵਾਸਤੇ, ਜਾਂ ਜੇਕਰ ਤੁਹਾਨੂੰ ਹੋਰ ਸਹਾਇਤਾ ਜਾਂ ਸਲਾਹ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਡੇ ਸਟਾਫ਼ ਦੇ ਕਿਸੇ ਮੈਂਬਰ ਤੋਂ ਪੁੱਛੋ। (ਜੇਕਰ ਤੁਸੀਂ ਚਾਹੁੰਦੇ ਹੋ ਤਾਂ ਉਹ ਤੁਹਾਡੇ ਨਾਲ ਤੁਹਾਡੀ ਆਪਣੀ ਬੋਲੀ ਵਿੱਚ ਗੱਲਬਾਤ ਕਰਨ ਦਾ ਪ੍ਰਬੰਧ ਕਰ ਸਕਦੇ ਹਨ।)

یہ معلومات گزارش کرنے پر دیگر زبانوں یا دیگر صورتوں، جیسا کہ، بریل (اکھری ہوئی لکھائی)، ہینا شیٹوں کے پڑھنے کی لکھائی یا آڈیو اور ٹیپ پر بھی فراہم کی جاسکتی ہیں۔ مزید معلومات یا اگر آپ کو کسی نہ دیا مشورے کی ضرورت ہو، تو براہ مہربانی ہمارے عملے کے ممبر سے بات کریں۔ (اگر آپ کو ضرورت ہو تو وہ آپ سے اپنی زبان میں بات کرانے کا انتظام کر سکتے ہیں۔)

Railway Housing Association



Bank Top House, Garbutt Square, Neasham Road, Darlington DL1 4DR
Registered Social Landlord: A1855 Registered Charity: 216825
MEMBER OF THE HOUSING OMBUDSMAN SERVICE

Tel: 01325 482125 Fax: 01325 384641
www.railwayha.co.uk