

Form serial number
(for office use only)



Application Form

Application for the post of:

Job Reference Number:

SECTION 1: PERSONAL INFORMATION

If you wish your application to be anonymised to the shortlisting panel please tick this box

Surname

Forenames

Home address

Mr Mrs Miss Ms

Please supply this information only if you are happy for us to contact you on them in confidence.

Home telephone no.

Mobile no.

Home email address

Work email address

This form may be photocopied. If handwriting the form please use a black pen. You may use additional sheets of paper (either written or typed) if there is not enough space to enter relevant information in any section.

This application form has been designed to offer you the opportunity of giving the fullest information, whilst enabling us to assess all candidates in a fair and objective manner. Please therefore make your application on this form. CVs will not be accepted.

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**SECTION 2:
PRESENT OR MOST RECENT EMPLOYMENT**

Post title

Date appointed

Name and address of employer

Period of notice required

Leaving date and reason for leaving (if applicable)

Salary £

Please outline your main duties and responsibilities

Please give details of any other work (paid, unpaid or voluntary) you plan to continue with if your application is successful.

**SECTION 7:
REFERENCES AND OTHER CHECKS**

We will require written references from two referees from your present/previous employers **covering the last three years of employment** (please use separate sheet if necessary). Please give referees who are not members of your family. If the two referees do not cover the three year period please provide additional referees on a separate sheet.

Please give details of your referees below, including stating if present or previous employer.

Present	<input type="checkbox"/>	Previous	<input type="checkbox"/>	Present	<input type="checkbox"/>	Previous	<input type="checkbox"/>
<u>Name</u>				<u>Name</u>			
<u>Relationship</u>				<u>Relationship</u>			
<u>Organisation</u>				<u>Organisation</u>			
<u>Address</u>				<u>Address</u>			
_____				_____			
_____				_____			
_____				_____			
<u>Telephone no.</u>				<u>Telephone no.</u>			
<u>E-mail</u>				<u>E-mail</u>			
_____				_____			

May the referees given above be asked for a reference if you are offered an interview?

Referee 1 Yes No
 Referee 2 Yes No

If you are related to or have a relationship with a current employee or Radian Group Board Member please give details.

Please do not forget to complete the attached equal opportunities monitoring form and return it with your application.

DECLARATION

I understand that this appointment, if offered, will be subject to the information given on this form being correct. I also understand that the appointment may be subject to satisfactory medical examination and references.

I can confirm that the information I have given on this form is correct and complete and that misleading statements or omissions may be sufficient for cancelling any agreements or offers made and if appointed may lead to my dismissal.

Signed

Date

If offered this position, when would you be able to start?

Please return your completed application form to the address supplied in the letter you received with this form.

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SECTION 8: SUPPLEMENTARY INFORMATION

This will only be used if relevant to the role applied for

Do you possess a current full driving licence?

Yes

No

Do you have access to personal transport?

Yes

No

REHABILITATION OF OFFENDERS ACT 1974

Please give details of any unspent convictions. If none, please enter 'none'.

Due to the sensitive nature of some posts, we may need to ask you for details of any criminal convictions both spent and unspent, cautions, reprimands, final warnings and any other information that may have a bearing on your suitability for the post. In the event of a successful application a registration check with the Independent Safeguarding Authority (ISA) and/or enhanced Criminal Records Bureau check may be sought. If the post you are applying for falls into this category, this will have been mentioned in the advertisement or job pack. Failure to disclose the information required for the post could lead to your application being rejected at any stage of the process, or if you are appointed, to your dismissal, if it is subsequently learned that you have not declared a criminal conviction or have not registered with the ISA.

Do you have evidence of your entitlement to live and work in the UK?

Yes

No

Please state your National Insurance Number

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Data Protection Statement

Confidentiality - The information you give us (Radian Group) will be used confidentially and only in accordance with the principles of the Data Protection Act 1998 (DPA 1998). We will use it only for the legitimate business purposes of Radian Group of companies (Drum Housing, Longwood Park, Oriel Group, Portal Housing, Swaythling Housing, Turnstone Support and Windsor Housing). We will not sell or give your information to anyone for market research.

Sharing with third parties - We will share your information with third parties (including our resident recruitment panel members) only where this is necessary to perform those business purposes or where we have a legal duty to share it (and always in accordance with the DPA 1998).

Sensitive information - The sensitive personal information you give us on this form will be used so that we can help meet your needs and circumstances. Your signature on this form, or you giving us your information, will be treated as your agreement to these uses of your sensitive personal information.

Your right of access - Under the DPA 1998 you have a right to access the information we hold about you. You must ask for this in writing and we may charge a fee for providing it.

Equal opportunities in employment monitoring questionnaire

Application for the post of: _____

Job Reference Number: _____

Where did you see this advertised? _____

Radian Group is committed to equality of opportunity in employment. A disability or health problem does not preclude full consideration for the job and applications from suitable people with disabilities are welcome. To assist us monitor the effectiveness of this policy, you are asked to complete the following questions. This information will be treated confidentially. This form will be detached from your application upon receipt.

Please answer the questions in each section by putting a tick ✓ in the appropriate box.

1. How old are you?

- 16 to 24 25 to 34 35 to 44 45 to 54
 55 to 64 65 to 74 75+

2. Do you have a long-term impairment or learning disability?

- Yes No I prefer not to say.

3. If yes, do you require any special working arrangements to be made?

- Yes No

4. What is your ethnic group? Tick one box from sections A to F.

A Asian or Asian British

- Bangladeshi
 Chinese
 Indian
 Pakistani
 Any other Asian background – specify here if you wish:

B Black, African, Caribbean or black British

- African
 Caribbean
 Any other black background – specify here if you wish:

C Mixed or multiple ethnic groups

- White and Asian
 White and black African
 White and black Caribbean
 White and Chinese
 Any other mixed background – specify here if you wish:

D White

- English, Welsh, Scottish, Northern Irish or British
 Irish
 Gypsy or Irish Traveller
 Any other white background – specify here if you wish:

E Any other ethnic group or background

- Arab
Any other group or background – specify here if you wish:

F I prefer not to say

5. What is your gender?

- Male Female I prefer not to say.

6. Do you regard yourself as transgender? (A transgender person lives or wants to live full-time in the gender that is not the one they were born with.)

- Yes No I prefer not to say.

If yes, please tick the box to indicate the gender you identify with.

- Male Female I prefer not to say.

7. Which of the following best describes your religion?

- None
 Baha'i
 Buddhist
 Christian (including Protestant, Catholic, and all Christian denominations, such as Church of England, Methodist, Baptist)
 Hindu
 Jain
 Jewish
 Muslim
 Sikh
 I prefer not to say.
 Other – specify if you wish:

8. Which of the following best describes how you think of yourself?

- Bisexual
 Heterosexual/straight
 Gay man
 I prefer not to say.
 Gay woman/lesbian
 Other – specify if you wish:

This information is used purely for equal opportunity monitoring. If you do not wish to answer the questions your application will not be affected. Please return this form with your application.