

**Application**

**for**

**Employment**







**Guidelines for Applicants**

*Please read these guidelines fully before completing the application form.*

**Cardiff Metropolitan University aims to ensure that all applicants are treated fairly and judged solely on their ability to do the job. Your completed application form will be assessed against the criteria in the person specification.**

* In keeping with Cardiff Metropolitan University’s Equal Opportunities Policy, we welcome applications from all sections of the community. Individuals are selected, promoted and treated on the basis of their merits and ability. The University holds the Two Ticks disability symbol and is positive about disabled people. We will interview all disabled applicants who meet the essential criteria on the person specification and consider them on their abilities.
* The equal opportunities monitoring information you provide will be treated in confidence. This part of the form isdetached from the information provided to the selection panel. However, the Chair of the panel is informed if any candidate has declared a disability as the University holds the Two Ticks disability symbol and interviews all disabled applicants who meet the essential criteria on the person specification. The equal opportunities monitoring information is stored by the HR department for a maximum of 6months and then destroyed if you are unsuccessful. Relevant information will be extracted from the form and included in your staff record held on the secure HR system database if you are appointed.
* Where a role has been identified as being an exception to the Rehabilitation of Offenders Act, the appointment will be subject to a Disclosure and Barring Service (DBS - formally CRB) check. The person specification will make it clear if a DBS check is required. If this is a requirement, please ensure that you complete the Rehabilitation of Offenders Act 1974 Declaration Form section of the application form.
* Certain sections of the form may not be equally relevant for all applicants. You should complete the form as it applies to you. All applicants must complete the section headed ***Further information in support of your application*.**
* Cardiff Metropolitan University requires candidate information to be in standard format on its own application form.
* Please complete the form in BLACK INK, or typescript, to facilitate photocopying.
* Please indicate if you are a new candidate applying for a post or a Cardiff Metropolitan University re-deployee, or an internal candidate already employed by Cardiff Metropolitan University by ticking the relevant box on the top of the application form.
* Candidates are selected for interview on the basis of **evidencing** the extent to which they satisfy the criteria at the application stage as outlined in the Person Specification.
* For academic posts applicants are required to submit an academic CV in addition to the Cardiff Metropolitan University application form.
* **Offers of employment are subject to the receipt of satisfactory references. References will be requested upon the identification of a preferred candidate following the interview process.** Referees must have direct knowledge of your work and must include your most recent employer. If you do not have a recent employer, references related to unpaid employment, for example in voluntary organisations, may be appropriate. Character references from friends and relatives are not acceptable. School leavers and graduates may give names of lecturers/tutors/head teachers, and any temporary or work experience employer, as appropriate. Please ensure your referees are in a position to respond promptly.
* Interviews are normally held within four weeks of the closing date. Applicants should arrange to be available to attend for interview as it is not normally possible to alter dates to suit individuals.
* If you have not received any communication within 3 weeks of the closing date please assume that your application has been unsuccessful. Unfortunately due to the volume of applications received we are unable to provide external applicants with feedback following shortlisting.
* Will you please note that applicants will be requested to provide documentary evidence of qualifications referred to on the person specification and be able to evidence their eligibility to work in the UK at interview.
* If you have a disability and require any reasonable adjustments to be made as part of the application and selection process please contact Human Resources.

*Please return your completed application to:*

**Human Resources - Cardiff Metropolitan University**

**Western Avenue**

**Cardiff CF5 2YB**

**Thank you for your co-operation**

**Please tick to indicate:-**



|  |  |
| --- | --- |
| New candidate |  |
| Re-deployee |  |
| Internal candidate |  |

**Application for Employment**

*Please read all accompanying information before completing this form*

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| --- | --- |
| Position Applied for |  |
| Surname and initials | Post Reference No |
| Home Telephone No / Mobile No | Work Telephone Number |
| **Current or most recent work experience**  |
| Name and address of employer |
|  |
| Position held | From (D/M/Y) | To (D/M/Y) |
| Notice required | Current salary |
| Reason for leaving (if applicable) |
| Please summarise your current duties and responsibilities |
| **Previous Employment/Work Experience** | **(Please list in order beginning with the most recent)** |
| FromD/M/Y | ToD/M/Y | Organisation  | Job title | Reason for leaving |
|  |  |  |  |  |

 (Please continue on a separate sheet if necessary)

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| **Education and qualifications**  | For non academic posts must complete sections a) b) and c) For academic posts only complete section a) if not completing section b) and c) |

1. **Secondary education**

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| --- | --- | --- | --- |
| Qualification(s) | Subjects | Level/Grade | Date studied |
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1. **Higher education and professional qualifications, giving highest qualification first**

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| --- | --- | --- | --- | --- |
| Academic Qualification(s) | Subject(s) | Level/Grade | Institution | Date studied |
|  |  |  |  |  |
| Professional Qualification(s) | Subject(s) | Level/Grade | Institution | Date studied |
|  |  |  |  |  |

1. **Higher education/professional qualification(s) currently being undertaken**

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| --- | --- | --- | --- |
| Qualification/Level | Subject(s) and method of study(e.g. full-time, part-time, distance learning) | Exam Date | Institution |
|  |  |  |  |
| **Membership of professional bodies** |
| Professional body | Membership Status |
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| **Research, consultancy and publications** |

Applicants for lecturing and research posts (and others, where appropriate) should attach to this application separate sheets containing details of research, consultancy and publications.

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| **Further information in support of your application** (continue overleaf if necessary) |

Please provide any further evidence of the extent to which you meet the selection criteria in the Person Specification for this post. If relevant, please specify how you have kept your knowledge and skills up to date; examples of your achievements; any professional activity; and training (subject and level).

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| **Education and Qualifications** |
| Essential |
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| Desirable |
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| **Knowledge** |
| Essential |
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| Desirable |
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| **Skills and Abilities** |
| Essential |
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| Desirable |
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| **Experience** |
| Essential  |
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| Desirable |
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| **Other Requirements** |
| Essential |
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| Desirable |
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**Please complete the enclosed form requesting personal details. The information is essential for processing your application.**

**Confidential**



|  |  |
| --- | --- |
| Position Applied for | Post Ref No (see advertisement) |
| School/Department | Location |
| **Personal information** |
| Surname | First Names | Preferred Name | Title |
| Address |
|  | Postcode |
| Tel No (day/mobile) May we contact you at work? YES/NO\* | Tel No (evening/mobile): |
| Email Address: |
| Do you hold a current Driving Licence? YES/NO\* |
| Are you a car owner? YES/ NO\* |
| **References** Please refer to the guidelines for applicants and give details below of two relevant referees, one of whom, must be your current employer |
| Name | Name |
| Position | Position |
| Working relationship and date(s) | Working relationship and date(s) |
| Company Name and Address | Company Name and Address |
|  |  |
|  |  |
|  |  |
| Postcode | Postcode |
| Tel No (day) | Tel No (day) |
| Email Address | Email Address |

**\*\* Cardiff Metropolitan University \*\* REFEREES WILL BE CONTACTED UPON THE IDENTIFICATION OF A PREFERRED CANDIDATE FOLLOWING THE INTERVIEW PROCESS**

|  |
| --- |
| Where did you see this post advertised? (If an advertisement, please state which newspaper and the date.) |

 (continued overleaf)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date of Birth  |  |  |  |  |  |  |
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|  |  |  |
| National Insurance Number  |  |  |  |  |  |  |  |  |  |  |
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| **Eligibility to Work in the UK**Do you require a Certificate of Sponsorship under Tier 2 of the Points Based System to enable you to work in the UK? Yes / No\*  (\*delete as applicable) |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Do you have any ‘unspent’ convictions within the meaning of the Rehabilitation of Offenders Act 1974 or pending court cases? |  |  |  |  |  |  |  |  |  |
|  Yes |  |  |  No |  |  |  |  |  |
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| If yes, please give details. |
| **Note:** You are not required to give information on ‘spent’ convictions under the Rehabilitation of Offenders Act 1974 unless the post has been identified as an exception to the Act, in which case please complete the attached Rehabilitation of Offenders Act Declaration Form. Please see the person specification for confirmation of whether the post for which you are applying is subject to a Disclosure and Barring Service (DBS – formally CRB) check and has therefore been identified as an exception to the Act. |

*I understand that providing false or misleading information will disqualify me from appointment or if appointed will render me liable to dismissal without notice. I declare that the information I have given is to the best of my knowledge true and complete.*

*I agree that the information given may be used for registered purposes under the Data Protection Act 2000.*

|  |  |
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| **Signed** | **Date** |

**You are only required to complete this form if the post for which you are applying requires a DBS (formally CRB) check and has therefore been identified as an exception to the Rehabilitation of Offenders Act 1974. Please see the person specification for confirmation of whether the post is subject to a DBS check.**

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| --- | --- |
| **NAME:** |  |
| **POSITION APPLIED FOR:** |  |

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| **REHABILITATION OF OFFENDERS ACT 1974 DECLARATION FORM** |
| Have you ever being charged with, or summoned, or cautioned, or convicted of, or had an Order made against you (including binding over) by any Court or Martial, or any Commanding Officer of the Armed or Merchant Services or been convicted for any Armed Disciplinary Offence?**NOTE**Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974, by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are therefore not entitled to withhold information about convictions, which for other purposes are ‘spent’ under the provisions of the Act and in the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action by Cardiff Metropolitan University. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the Order applies. |

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| **Declaration** |
|  I give above details of convictions, of which you should be aware in considering my application for the above mentioned post. |
| **Signed:** | **Date:** |

We need to collect additional information in order to ensure that we meet our statutory responsibilities (the General Duties under the Equality Act 2010 and the Public Sector Equality Duty in Wales), to measure the effectiveness of our policy, ensure that all applicants continue to be treated equitably, and equally with regard to the statutory protected characteristics, and monitor the success rate of applicants with protected characteristics. The information is collated and published as part of the University’s annual reporting process. The protected characteristics for the purposes of the Act are: age, disability, gender reassignment, marriage & civil partnership, pregnancy & maternity, race, religion or belief, sex, and sexual orientation.

We would very much appreciate this information. However, if you do not wish to provide all or some of it you may use the ‘prefer not to say’ option. This will not affect the selection process. If you have any queries or would like further information on Equality & Diversity monitoring please contact equalities@cardiffmet.ac.uk.

|  |  |
| --- | --- |
| **Sex** (please tick the appropriate box) Male Female **Gender Identity** (please tick the appropriate box) **Is your gender identity the same as the gender you were originally assigned at birth?** Yes No Prefer not to say**Marital Status** (please tick the appropriate box)Married or Civil Partnership Not Married or Civil Partnership Prefer not to say**Nationality** (please confirm your nationality below according to your passport) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Ethnicity** (please tick appropriate group - classifications in line with ECU)White Gypsy or TravellerBlack or Black British – CaribbeanBlack or Black British – AfricanOther Black backgroundAsian or Asian British - IndianAsian or Asian British – PakistaniAsian or Asian British – BangladeshiChineseOther Asian backgroundMixed – White and Black CaribbeanMixed – White and Black AfricanMixed – White and AsianOther mixed backgroundArabOther ethnic backgroundPrefer not to say |

**National Identity** (please tick the appropriate boxes)

Please chose either one or two from the following list, and mark your main choice 1. If you view yourself as having more than one National Identity, please mark your second choice 2.

British Other

English Scottish

Irish Welsh

Prefer not to say

(Classifications in line with HEFCW)

**Disability**

A person has a disability if they have a physical or mental impairment, and the impairment has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.

Do you consider yourself to have a disability, impairment, health condition or learning difficulty? If so, please tick the appropriate box (classifications in line with ECU)

No known disability

Two or more impairments and/or disabling medical conditions

A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D

General learning disability (such as Down’s syndrome)

A social/communication impairment such as Asperger’s syndrome/other autistic spectrum disorder

A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart

disease, or epilepsy

A mental health condition, such as depression, schizophrenia or anxiety disorder

A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair

or crutches

Deaf or serious hearing impairment

Blind or a serious visual impairment uncorrected by glasses

A disability, impairment or medical condition that is not listed above

Prefer not to say

|  |  |
| --- | --- |
| **Pregnancy & Maternity: Are you currently pregnant or have you been pregnant in the last year?** (please tick the appropriate box)YesNoPrefer not to say**Maternity Leave: In the past year have you taken any maternity leave?** (please tick the appropriate box)YesNoPrefer not to say**Religion: What is your religion?** (please tickthe appropriate box - classifications in line with ECU)No religion Buddhist Christian Hindu Jewish Muslim Sikh SpiritualAny other religion or belief Prefer not to say | **Sexual Orientation: What is your sexual orientation?** (please tick the appropriate box - classifications in line with ECU)Bisexual Gay man Gay woman/lesbianHeterosexual Other Prefer not to say**Languages** (please tick the appropriate boxes)**Can you speak Welsh?** Not at all A little Fairly well Fluently Prefer not to say**Can you write in Welsh?** Not at allA little Fairly well Fluently Prefer not to say |

**Languages cont.**

**Can you read Welsh?**

Not at all

A little

Fairly well

Fluently

Prefer not to say

**Can you understand Welsh?**

Not at all

A little

Fairly well

Fluently

Prefer not to say

**Are you currently teaching through the medium of Welsh?**

Yes

No

**Are you able to teach through the medium of Welsh?**

Yes

No

**Are you able to speak any other language(s)?**

Yes

No

If yes, please state the language(s):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for your co-operation**