**Application for Triage Worker**

Thank you for choosing to apply for a role with ihAg.

Please complete and return this form to Janice Hubbard at ihAg, The Chapman Centre, 1 Black Horse Lane, Ipswich, IP1 2EF in an envelope marked PRIVATE and CONFIDENTIAL or email to janice@ihag.co.uk. Completed applications must arrive at the office by 12 noon, on 21 October 2024

Please enclose your CV, detailing your employment, qualification and training history to date.

In line with our Equal Opportunity procedures, this first page will be substituted with a reference number, and the Equal Opportunities Monitoring Form at the back will be removed, as soon as the application reaches this office. Short-listing will then be completed without reference to them.

In order to keep costs down, we will only contact short-listed candidates.

|  |
| --- |
| Where did you hear about this job? |
| First Name(s):  | Surname/Family name: |
| Home Address: | Home Number:Mobile Number: |
| Email Address: | Indicate when you would be able to take up the post: |

ENTITLEMENT TO WORK IN THE UK

To comply with the Immigration, Asylum and Nationality Act 2006, all prospective employees will be asked to supply evidence of eligibility to work in the UK. We will ask to see an appropriate official document (for example a document showing your national insurance number, your birth certificate or passport). Do not send these now. Further information will be sent to you if you are shortlisted.

|  |
| --- |
| Do you require a work permit to work in the UK? Yes [ ] No [ ]If yes and you already have a work permit, please give the expiry date:Please be aware if you are offered the position you will be required to provide complete baseline security checks.  |

[For office use only, reference number:...........]

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**1. What skills,experience and knowledge can you bring to the post?** *(Continue on a maximum of 2 other pages if necessary.)*

*Please note that short-listing is based on scoring applications against each item detailed in the Person Specification.*

ihAg is committed to safeguarding and promoting the welfare of people with additional vulnerabilities, and expects all staff to share this commitment. Please note that this post is subject to an enhanced DBS check.

ihAg is an equal opportunities employer and welcomes applications from all people with the relevant skills and experience irrespective of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race (including colour, nationality and ethnic or national origins), religion or belief, sex and/or sexual orientation.

Please indicate if you have any accessibility requirements for interview:

|  |
| --- |
|  |

Please bear in mind that we will request a reference from your previous employer and ask about your performance and attendance record. Is there anything you want to make us aware of at this time?

|  |
| --- |
|  |

The post will only be offered subject to two successful references.

Please give the names and addresses of two people who could provide a reference for you.

(One must be your current or most recent employer and neither should be a relative or someone who knows you solely in the capacity of a friend.)

|  |  |  |
| --- | --- | --- |
|  | Reference 1 | Reference 2 |
| Name: |  |  |
| Address:  |  |  |
| Email address: |  |  |
| Telephone No: |  |  |
| Occupation: |  |  |
| How do they know you?  |  |  |

**My Declaration**

By signing and dating below this statement I confirm that:

* to the best of my knowledge, everything I have written in this application is correct.
* I understand that giving false information or omitting relevant information could disqualify my application and, if I am appointed, could lead to an offer being withdrawn or my dismissal.
* I have no relationship of any type with anyone connected to ihAg in any way, OR, if I do have a relationship to declare, then I have provided details with this application[[1]](#footnote-2). [Declaring such a relationship will not necessarily bar you from being considered for this post but you must inform us.]
* I am not on the list of those barred from working with children and adults with vulnerabilities, disqualified from work with children, or subject to sanctions imposed by a regulatory body and either have no convictions, cautions,or bind-overs, OR I have provided details of my record with this application[[2]](#footnote-3). Mark ‘X’ here if you are sending a separate document

|  |  |
| --- | --- |
| Signed |  |
| Date |  |



**Equal Opportunities**

**Monitoring Form**

Post:

Date:

Our Equality and Diversity at Work Policy is enclosed in the Job Pack and in order to ensure that it is effective, we need to obtain certain information. Your co-operation is sought in providing this. The information provided will only be used by ihAg for the purposes of measuring the effectiveness of our policy.

It will be treated in strictest confidence and will be detached from your application as soon as the application form reaches ihAg (as will the front page with your name etc on it, for short-listing). There will be no way of linking the information in this monitoring form to your application, and the information contained on this page will be used for statistical purposes only.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Please mark the relevant box with an X, i.e.* | *Selected* | *X* | *Not selected* |  |

-oOo-

|  |
| --- |
| 1. Please tick the box that best describes the race you consider yourself to be: |
|  |
|  | Black |  | White |  | Mixed |  | Other |  |

|  |
| --- |
| If other, please specify ................................................................................................. |

|  |
| --- |
| 2. Similarly, for what you consider to be your ethnic origin: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Indian |  | Pakistani |  | Bangladeshi |  |
|  |  |  |  |  |  |
| Other Asian (Non-Chinese) |  | Black Caribbean |  | Black African |  |
|  |  |  |  |  |  |
| Black (other) |  | Latin American |  | Chinese |  |
|  |  |  |  |  |  |
| White British |  | White Irish |  | White (other) |  |
|  |  |  |  |  |  |
| Other |  |  |  |  |  |

If other, please specify .................................................................................................

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 3. Please indicate your biological sex:  | Male |  | Female |  |

4. Please indicate which gender you identify as:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Male |  | Female |  | Non-Binary |  | Other |  |

If other, please specify .................................................................................................

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 5. Do you consider yourself to have a disability? | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 6. Are you a Registered Disabled person? | Yes |  | No |  |

***Thank you for your co-operation.***

1. This should be on a separate page (if submitting an application in paper format) or a separate document if sent by email. [↑](#footnote-ref-2)
2. This should be sent in a sealed envelope marked confidential to the person named in the application process, and cross referenced in this application. [↑](#footnote-ref-3)