



**Application**  
**Section A: Personal Details**

This section is used only for gathering information and contact details. It will be detached from your application for short listing to ensure objectivity within the recruitment process.

Application for the position of:	
Where did you see this vacancy advertised?	

<b>Personal Details</b>	
Title: Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> If other please state: _____	
Surname:	Forenames:
Address:	
Postcode:	
National Insurance Number:	
Telephone (home) (Mobile) (work)	Email Address:
Are you entitled to work in the United Kingdom? Yes <input type="checkbox"/> No <input type="checkbox"/> (Please note, you will need to provide proof if you are offered the post)	
Please give brief details of any special arrangements you may require to help you to attend an interview or perform the role	
Have you any criminal convictions that have not been spent? Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please state:	
(please note, we are required to carry out CRB checks for certain posts)	
Are you related to/know any member of Welsh Rowing Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please state the name, relationship and, if applicable the department in which he/she is employed:	

**References**

*Please note referees will only be contacted when an offer of employment has been made*

**Present/Most recent employer/College**

Name:

Address/Department:

Postcode:

Tel No:

Position:

Email Address:

**Previous Employer:**

Name:

Address:

Postcode:

Tel No:

Position:

Email Address:

## Equal Opportunities Monitoring

### Why monitor equal opportunities?

As part of Welsh Rowing commitment to equal opportunities we need to monitor the makeup of our employees. The data will help us to identify any trends or patterns emerging that may help us assess the extent to which we are providing equality of opportunity in areas such as recruitment.

Personal Information	
Your name: (Optional)	
Post Title:	

Age		
<input type="checkbox"/> Under 25	<input type="checkbox"/> 25-34 years	<input type="checkbox"/> 35-44 years
<input type="checkbox"/> 45-54 years	<input type="checkbox"/> 55-64 years	<input type="checkbox"/> 65+ years

Gender-	
<input type="checkbox"/> Male	<input type="checkbox"/> Transgender
<input type="checkbox"/> Female	<input type="checkbox"/> Do not wish to disclose

Religion or Belief		
<input type="checkbox"/> Buddhist	<input type="checkbox"/> Christian (including Catholic, Protestant and all other Christian denominations)	<input type="checkbox"/> Hindu
<input type="checkbox"/> Jewish	<input type="checkbox"/> Muslim	<input type="checkbox"/> Sikh
<input type="checkbox"/> No religion	<input type="checkbox"/> Prefer not to answer	<input type="checkbox"/> Any other religion: Please write in _____

### Disability

The Disability Discrimination Act 1995 defines a disabled person as anyone with a 'physical or mental impairment that has a substantial and long-term adverse effect upon his/her ability to carry out normal day-to-day activities.'

Do you consider yourself to have a disability?  Yes  No

If yes, what is the nature of your disability?

Please provide details of your disability and specify any adjustments we could make to accommodate your needs:

Sexual Orientation	
<input type="checkbox"/> Bisexual	<input type="checkbox"/> Gay man
<input type="checkbox"/> Heterosexual/straight	<input type="checkbox"/> Gay woman/Lesbian
<input type="checkbox"/> Other	<input type="checkbox"/> Prefer not to say

Marital Status
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<input type="checkbox"/> Married/Civil Partner	<input type="checkbox"/> Partner	<input type="checkbox"/> Divorced
<input type="checkbox"/> Single	<input type="checkbox"/> Widowed	<input type="checkbox"/> Prefer not to say

<b>Caring Responsibilities</b>		
<input type="checkbox"/> Child/Children	<input type="checkbox"/> Adults	<input type="checkbox"/> No
<input type="checkbox"/> Prefer not to say		

<b>Welsh Speaking</b>		
<input type="checkbox"/> Yes (Fluent)	<input type="checkbox"/> Yes (Partly)	<input type="checkbox"/> No

<b>Ethnic Origin</b>	
<b>White</b>	<input type="checkbox"/> Welsh/English/Scottish/Northern Irish/British
	<input type="checkbox"/> Irish
	<input type="checkbox"/> Gypsy or Irish Traveller
	<input type="checkbox"/> Any other White background: please write in _____
<b>Mixed</b>	<input type="checkbox"/> White and Black Caribbean
	<input type="checkbox"/> White and Black African
	<input type="checkbox"/> White and Asian
	<input type="checkbox"/> Any other mixed background: please write in _____
<b>Asian, Asian British, Asian English, Asian Scottish or Asian Welsh</b>	<input type="checkbox"/> Indian
	<input type="checkbox"/> Pakistani
	<input type="checkbox"/> Bangladeshi
	<input type="checkbox"/> Any other Asian background: please write in _____
<b>Black, Black British, Black English, Black Scottish or Black Welsh</b>	<input type="checkbox"/> Caribbean
	<input type="checkbox"/> African
	<input type="checkbox"/> Any other Black background: please write in _____
<b>Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh or other Ethnic Group</b>	<input type="checkbox"/> Chinese
	<input type="checkbox"/> Any other background: please write in _____

**Thank you for completing this form.**  
**This form contains personal data which will only be processed in accordance with Data Protection Act 1998.**

# Application for Employment

Post applied for:	
Location:	

## **Reason for applying**

In this section, please outline how your knowledge, skills and experiences meet the criteria required for this role (as outlined in the Job Description and Person Specification). You should draw upon your experiences from your current or previous roles or from other relevant situations (such as activities outside work). **Please expand the box below as necessary.**

**Employment History**

Name and address of current/most recent employer:	
Position held:	
Salary:	Benefits:
Dates of employment: From:	To:
Summary of duties (please expand this box as necessary)	
Reasons for leaving:	
What notice period is required by your current employer?	

**Previous Employment/Career History**

List all your employment history, explaining any gaps.

<b>Dates From – To</b>	<b>Employers Name and Address</b>	<b>Position</b>	<b>Salary</b>	<b>Reasons for Leaving</b>	<b>Duties</b>

Please expand table and add additional rows as required

**Secondary Education**

School/College attended	Qualifications and Subject	Grade Attained	Date Attained

**Further and Higher Education**

College/University attended	Qualifications and Subject	Grade Attained	Date Attained

**Other Qualifications/Training**

Include details of membership of any professional bodies/institutions or any other qualifications.
Include details of relevant, job related courses in excess of three days duration, attended in the last 2 years.



**Additional Information**

Please provide any other details which you feel could support your application

A large, empty rectangular box with a thin black border, intended for the applicant to provide additional details that support their application. The box is currently blank.

Do you hold a current Driving Licence? (please tick)

Full  Provisional  No Licence

Do you have access to a vehicle for business purposes? (please tick)

Yes  No

**Signature**

I certify that, to the best of my knowledge, the information contained on this application form is true and correct.

All or part of the information provided on this form may be held on a computer or in a form which makes it subject to the Data Protection Act. By completing this form you give your consent to the data being held and processed by Welsh Rowing for Equal Opportunities monitoring purposes in accordance with the Data Protection Act 1998.

**Signature** \_\_\_\_\_ **Date** \_\_/\_\_/\_\_\_\_