HMIC job application form

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| Name of Job Applied for: HMI Staff officer Eastern region |
| Campaign Reference Number: HMISOZB170213 |

## Notes on completion

This form should be completed in black ink or typescript. Additional sheets may be used for sections 3 and 4. Completed applications must be returned with your line manager’s comments.

Closing date: 8am on 13 February 2017. Please return completed applications to [Recruitment@hmic.gsi.gov.uk](mailto:Recruitment@hmic.gsi.gov.uk) by this date.

## About the vacancy

So that we can judge the effectiveness of our recruitment advertising, please tell us how you found out about this vacancy.

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| --- | --- | --- | --- |
| Personal information | | | |
| Surname (BLOCK LETTERS) | Forenames (in full) (BLOCK LETTERS) | | Any other previous names (BLOCK LETTERS) |
| Title (Dr, Mr., Mrs., Miss, Ms etc) |  | |  |
| Home Address:  Postcode: | | Telephone Number: | |
| Mobile Number: | |
| Please indicate the number on which you would prefer to be contacted | |
| Force/organisation and address: | | Substantive grade: | |

**Please attach you CV to the email when submitting your application**

Give include details of any education, qualification, knowledge or experience, which are directly relevant to the role for which you are applying.

Please address, in the box below how you meet the essential (and desirable) criteria set out in the job description. (Maximum 250 words)

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| CV |
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| Employment information | | | |
| Where possible, please give details of all jobs you have held within the last five years, starting with the most recent. Include paid employment, key positions in the voluntary sector and membership of central or local committee. Please indicate any relevant experience you feel is applicable to the role.  (Continue on a separate sheet if necessary.) | | | |
| **Present post:** | | **From:** | |
| Name and address of employer: | Positions held and nature of work: | | Reason for leaving: |
|  |  | |  |
| Basic salary: | | Allowances/bonuses: | |
| **Previous post:** | **From:** | | **To:** |
| Name and address of employer: | Positions held and nature of work: | | Reason for leaving: |
|  |  | |  |
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| Name and address of employer: | Positions held and nature of work: | | Reason for leaving: |
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| Name and address of employer: | Positions held and nature of work: | | Reason for leaving: |
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| --- | --- | --- |
| **Previous post:** | **From:** | **To:** |
| Name and address of employer: | Positions held and nature of work: | Reason for leaving: |
|  |  |  |
| Please give details of any time not already accounted for (including unemployment) | | |
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## Security clearance

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| --- | --- |
| Current level of clearance held: |  |
| Where is security clearance held: |  |
| Please give name and contact details of who is responsible for current security clearance: |  |

## Applicant declaration

|  |  |
| --- | --- |
| Are there any outstanding disciplinary matters that HMIC should be aware of? | Yes/No |
| If yes provide details: | |
| Do you have any notifiable associations that HMIC should be aware of? | Yes/No |
| If yes provide details: | |
| Do you have any outside business interests? | Yes/No |
| If yes provide details: | |

The details given on the application are correct to my knowledge and belief.

|  |  |
| --- | --- |
| Signature: | Date: |

Please provide your current line manager's details

|  |  |
| --- | --- |
| Name: | Telephone number: |
| Email address: | |
| Signature: | Date : |

## Chief officer’s comments

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| Do you support this application? |

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| Please comment on the applicant’s suitability for the post applied for: |

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| If the officer is successful, please confirm that he or she will be released to take up the secondment with four weeks' notice. |

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| --- | --- | --- |
| Please tick to confirm that the applicant is not the subject of a live attendance management, performance management or discipline warning. | | |
|  | Yes | No |
| If yes please provide details. | | |

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| Signed: | Name: |
| Job title: | Date: |

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Please note that your application will not be considered unless you complete the equal opportunities section.

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| **Equal Opportunities Monitoring Survey** | | | | | | | |
| We want to make sure our HR processes are fair for all staff. Please help us to do this by completing and returning the attached Equal Opportunities Monitoring Form, which forms part of the application form. By matching your personal details with your final results, we can look at how well different groups perform within the process.  Personal data will be treated in strict confidence and will not be seen by those directly involved in the HR process or affect your marks or result in any way. Your result is based solely on your performance. The information on this form will be used for monitoring purposes only. | | | | | | | |
| **NI Number** | |  | | | **Working Pattern** |  | |
| **Age** |  | | | | | | |
| **Gender** |  | | | | | | |
| **Gender Identity**  **(optional)** | | | If you identify as transsexual transgender (in that you have effected a permanent change of gender identity) or as intersex, which group do you identify with? | | | | |
| **Ethnic Origin** Please tick against one of the following | | | | | | |
| **Asian or Asian British** | | | | | **Mixed** | |
| **Black or Black British** | | | | | **White** | |
| **Chinese or Other Ethnic Groups** | | | | |  | |
| **Religion or Belief** Please tick against one of the following | | | | | | | |
|  | | | |  | | | |
| **Sexual Orientation (optional)** | | | | | | | |
|  | | | | | | | |
| **Disability** Please tick against one of the following | | | | | | | |
| Do you consider yourself to have a disability?    *The Disability Discrimination Act 1995 defines a disabled person as someone who has a physical or mental impairment, which has a substantial and adverse long-term effect on his or her ability to carry out normal day-to-day activities.* *The definition of disability applies to a wide range of disabilities (from people with Alzheimer’s and arthritis to those with learning disabilities, depression, diabetes, cancer etc).*  **Any information you provide here will be used for monitoring purposes only – if you need any reasonable adjustments you should arrange these separately.** | | | | | | | |