

Application Form



Job Title:	
Surname/Family Name:	Other Names:
Address:	
Contact number:	
e-mail:	
Where did you see this job advertised?	

HIGHER EDUCATION AND/OR PROFESSIONAL QUALIFICATIONS

Degree/Qualification	University (or College)	Subject	Class / grade obtained	Date

MEMBERSHIP OF PROFESSIONAL ORGANISATIONS

Awarding Body	Membership Type/Membership No.	Date



STATEMENT IN SUPPORT OF YOUR APPLICATION

REFEREES	
Name	Relationship to you
Address	
Tel No	Fax No
Email	
Can we contact this referee prior to offering you an interview? <div style="text-align: right;">Yes No</div>	
REFEREE	
Name	Relationship to you
Address	
Tel No	Fax No
Email	
Can we contact this referee prior to offering you an interview? <div style="text-align: right;">Yes No</div>	

Declaration

I confirm that, to the best of my knowledge, all the information provided in this application form is correct.

Signed: _____ **Date:** _____

Please forward the completed form to:

**Jo Hurley
HR Manager
ChandlerKBS
Chandlers House
Terra Nova Way
Penarth Marina
Cardiff, CF64 1SA**

or email it to careers@chandlerkbs.com.

Equal Opportunities Monitoring



Please complete the form on the next page and return it with your application form.

You do not have to complete the form but if you do it will help us to monitor the demographic profile of applicants.

Any information supplied will be kept separate to your application form and will be used for equal opportunities monitoring purposes only.



Equal Opportunities Monitoring

ChandlerKBS is an equal opportunities practice and is committed to a policy of treating all job applicants fairly. Please provide the information detailed below to assist us in monitoring the effectiveness of our equal opportunities policy. The information provided will be used for monitoring purposes only and will be treated in the strictest confidence.

POSITION APPLIED FOR

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GENDER (please tick against one of the following):

- Male
- Female
- Trans/cross-gender
- Do not wish to answer

MEDICAL INFORMATION

Do you have any disabilities? YES/NO

Have you ever suffered from any serious illness or chronic disease?
YES/NO

Do you have, or have you had, a medical condition that might affect your performance or the duties of the post? YES/NO

MARITAL STATUS (please tick against one of the following):

- Single
- Married/civil partnership
- Divorced
- Widowed
- Do not wish to answer

AGE

- 16-24
- 25-34
- 35-44
- 45-54
- 55+

ETHNIC ORIGIN (please tick against one of the following):

- White (English)
- Bangladeshi
- Black African
- White (Irish)
- Indian
- Black Caribbean
- White (Scottish)
- Pakistani
- Black (Other)
- White (Welsh)
- Chinese
- Mixed Race
- White (Other)
- Other Asian
- Other
- Do not wish to answer

Equal Opportunities Monitoring

COMMUNITY BACKGROUND (to be completed by applicants in Northern Ireland only)

Regardless of whether they actually practice a particular religion, most people in Northern Ireland are perceived to be members of either the Protestant or Roman Catholic communities.

Please indicate the community to which you belong by ticking the appropriate response below:

- I am a member of the Protestant community:
- I am a member of the Roman Catholic community:
- I am not a member of either the Protestant or the Roman Catholic communities:

If you do not answer the above question, we are encouraged to use the residuary method of making a determination, which means that we can make a determination as to your community background on the basis of the personal information supplied by you in your application form.