

EASY READ JOB APPLICATION FORM











The Job Title: Expert with Lived Experience Co-facilitator / Trainer

If a question asks you for a yes or no answer, circle or tick the box that best describes the answer you want to give.

Please Tell Us The Following Details:

	<p>Name:</p>
	<p>Home Address:</p>
	<p>Home Number:</p>
	<p>Mobile Number:</p>



	<p>Email Address:</p>
<p>18+</p>	<p>Date of Birth:</p>
	<p>Are you allowed to work in the UK?</p> <p>Please circle/tick:</p> <div style="display: flex; justify-content: space-around; align-items: flex-end;"> <div style="text-align: center;"> <p>Yes</p> <p>✓ <input checked="" type="radio"/></p> </div> <div style="text-align: center;"> <p>No</p> <p>X <input type="radio"/></p> </div> </div>
	<p>Do you have a learning disability (not a learning difficulty) that you will need help with at work?</p> <p>Please circle/tick:</p> <div style="display: flex; justify-content: space-around; align-items: flex-end;"> <div style="text-align: center;"> <p>Yes</p> <p>✓ <input checked="" type="radio"/></p> </div> <div style="text-align: center;"> <p>No</p> <p>X <input type="radio"/></p> </div> </div>
	<p>Tell us about any disability we may need to support you with:</p>
	<p>Please disclose any personal relationship with a director or employee of the Trust:</p>
	<p>Can you drive?</p> <p>Please circle/tick:</p>




	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>Yes</p> <input checked="" type="radio"/> </div> <div style="text-align: center;"> <p>No</p> <input type="radio"/> </div> </div>
	<p>Can you verbally communicate effectively?</p> <p>Please circle/tick:</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>Yes</p> <input checked="" type="radio"/> </div> <div style="text-align: center;"> <p>No</p> <input type="radio"/> </div> </div>
	<p>Why do you want to work with us?</p>

This is about any paid or unpaid job you have had


Think about the job description when you answer the next set of questions.



Current Job – Please tell us about the job you are doing now even if you do not get paid for it

	<p>The name and address of the company you work for:</p>
	<p>Is your work paid or unpaid?</p>



	<p>What is your job title?</p>
<div data-bbox="172 365 292 427" data-label="Text"> <p>Work</p> </div> <div data-bbox="142 479 304 685" data-label="Form"> <div>1</div> <div>2</div> <div>3</div> </div>	<p>What tasks do you do?</p>
	<p>Date you started working at this company:</p>
	<p>What is your current salary (how much you get paid every year):</p>



Previous Work - Job 1

	<p>Who did you work for in the past?</p>
<div data-bbox="172 1756 292 1818" data-label="Text"> <p>Work</p> </div> <div data-bbox="142 1856 304 2063" data-label="Form"> <div>1</div> <div>2</div> <div>3</div> </div>	<p>What tasks did you do?</p>



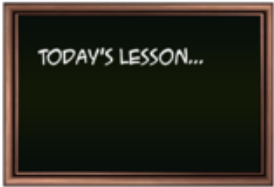

	When did you start this job?
	When did it end and why did you leave?

Previous Work – Job 2

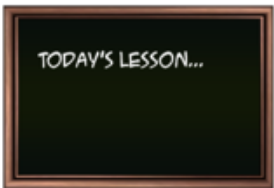

	Who else did you work for in the past?
<div>Work</div> 	What tasks did you do?

	<p>When did you start this job?</p>
	<p>When did it end and why did you leave?</p>

SCHOOL AND COLLEGE

	<p>What school or college did you go to?</p>																							
	<p>When did you leave school or college?</p>																							
<div data-bbox="113 1570 387 1756">  </div> <div data-bbox="113 1800 387 1937">  </div>	<table border="1"> <thead> <tr> <th>Name of Exams Taken:</th> </tr> </thead> <tbody> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </tbody> </table>	Name of Exams Taken:											<table border="1"> <thead> <tr> <th>Exam Results:</th> </tr> </thead> <tbody> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </tbody> </table>	Exam Results:										
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Exam Results:																								







What Training Courses Have you Completed?









 	Name of Training Courses:	Results of Training Courses:




REFERENCES

- Please give details of **2** referees
- One of the referees should be your current or last employer
- A referee is someone who knows you well but is not family. They can be people like: Social Worker, Support Worker, Day Service Worker, Doctor, Key Worker

Reference 1		Reference 2	
	Name:		Name:
	Job Title:		Job Title:
	Address:		Address:

	Phone Number:		Phone Number:
	Mobile Number:		Mobile Number:
	Email Address:		Email Address:
	How do they know you?		How do they know you?

INTERVIEW SUPPORT

 <p>Interview</p>	<p>Will you require any additional support or resources at an interview? If so, tell us what you need:</p>
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SUPPORTING STATEMENT

Refer to the Job Description in this section.

Write down why you think you would be good for this job and anything else that may help us to choose you:

Declaration

In accordance with the Data Protection Act 1998 the information provided in this application form may be sensitive personal data.

Such data will be used to assess your suitability for the post and, if employed, this information will form the basis of your employee personnel file. The information provided on this form will be entered onto a computerised database.

Additionally, it may be necessary for the information you have supplied to be shared with other organisations and recommendations for other roles

By signing below, you give your consent to the Trust to record your sensitive personal data and to disclose the data given on this form to third parties to assess your application, any subsequent employment and for any matter relating to that employment.

Before You Sign This Form:

Check the information you have given us on this form is right and true. If you have given us wrong information or not told us something important that we need to know, you may not be able to get a job with us or you might have to leave your job if you already work here.

By Signing This Form, You Are Agreeing To:

Having a criminal record check if we offer you a job that requires one.

Having an Occupational Health Assessment as part of the recruitment process.



Signed.....



Date.....