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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Logo (2)  **Application for Employment** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If you would like this document in an alternative format e.g. audio, braille, or in a different language, please contact Educator Solutions HR Services on 01603 307760 or email [HRenquiry@educatorsolutions.org.uk](mailto:HRenquiry@educatorsolutions.org.uk)  **Instructions:-**   * Please complete all **sections** as well as the **Recruitment Monitoring Form** * Please write in **black ink** and **block letters** so the form can be photocopied * Put your **name**, the job title of the **post applied for** and job **reference number** at the top of any additional sheets you use * **Sign and date** the declaration at the back of this form and also sign the Recruitment Monitoring Form.   Please see Appendix 1 for information on Data Protection.  **Any fields marked with an asterix(\*) are mandatory.**  Where options are outlined below please indicate which applies to you by inserting ‘X’. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Post applied for \*** | | | | | | | | | | | | **Early Years Teacher** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reference number\* | | | | | | | | | |  | | | | | | | | | | | School/Academy/Trust | | | | | | | | | | | | | | **Sheringham Woodfields School** | | | | | | | | | | |
| 1. **Personal details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mr |  | | Mrs | | |  | | | | | Ms | |  | | | Miss | | | | | | |  | | | Other (please state) | | | | | | | | | | | | | | | | | | | |
| First name(s)\* | | | | | | | | | | |  | | | | | | | | | | | | | Surname\* | | | | | | | |  | | | | | | | | | | | | | |
| Have you ever used any other names\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No | |
| If yes, please state | | | | | | | | | | First name(s) | | | | | | | | | |  | | | | | | | | Surname | | | | | | | | | | | | |  | | | | |
| Address (including postcode)\* | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Email address\*  This will be used to send all future correspondence about this job | | | | | | | | | | | | |  | | | | |
| Can we contact you by telephone? | | | | | | | | | | | | | | | Yes | | | | | | Telephone number | | | | | | | | | |  | | | | | | | | | | | | | No | |
| Preferred start date | | | | | | | | | | | | | | | **/  /** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| National Insurance Number | | | | | | | | | | | | | | |  | | | | | | | | | | | | | Date of birth\* | | | | | | | | | | | | | **/  /** | | | | |
| If the duties of the job include travel, which could be to venues not accessible by public transport, are you able to meet this requirement? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No | |
| If the job requires you to travel and you intend to use a motor vehicle, do you hold a driving licence valid in the UK? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No | |
| If you do have a driving licence, please tell us what type | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full | |  | | | | Provisional | | | | | | |  | | | | Other (please specify) | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| On what basis are you applying for the job?\* | | | | | | | | | | | | | | | | Full time | | | | | | |  | | Part time | | | | | | |  | | | | Job share | | | | | | | |  | |
| If you are not applying to work full time, how many hours would you wish to work per week? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| Are you related to, or in a close relationship with any Governor/Trustee or anybody already employed by the school/academy/Trust?\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No | |
| If yes, please state their position. | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| How did you hear about this job?\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Current or most recent employment/self-employment/voluntary work** (If self-employed enter the name and address of your business) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employer’s name and address including postcode | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Job title/nature of self-employment/voluntary work | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| If a school, name, group size and number on roll | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Current or last salary and scale | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | Weekly hours | | | | | | | | | | | | | |  |
| Date started | | | | | | | **/  /** | | | | | | | | | | | | | | | | | Date of leaving (if relevant) | | | | | | | | | | | | | | | **/  /** | | | | | | |
| Notice required | | | | | | |  | | | | | | | | | | | | | | | | | Reason for leaving | | | | | | | | | | | | | | |  | | | | | | |
| Brief description of job/services provided | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| If you have more than one job, please complete the sections below. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Other current employment** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name and address | | | | | Date from | | | | | | | | | Date to | | | | | | | | | | Job title (if teaching include the age range taught) | | | | | | | | | | Weekly hours | | | | | | | | Reason for leaving | | | |
|  | | | | | **/  /** | | | | | | | | | **/  /** | | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | |
| 1. **Employment history** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list all employment, starting with the most recent, including self-employment and periods of voluntary work since leaving full time education.  Although not all jobs you have held may seem relevant to your application, it is important for you to give as much information as you can as you may have developed transferable skills in the job which you can highlight later in your application. Also, many jobs are subject to a Disclosure and Barring Service (DBS) check and it is important to demonstrate that there are not unexplained gaps in your career, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employer’s name and address | | | | | | | | | | Date from | | | Date to | | | | | Job title (if teaching include the age range taught) | | | | | | | | | | | | | | | | Weekly hours | | | | | | | | Reason for leaving | | | |
|  | | | | | | | | | | **/  /** | | | **/  /** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |  | | | |
| 1. **Breaks in employment history** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If you have had any breaks in employment since leaving school, please give dates and details of your activities during these times e.g. unemployment, raising a family, study, foreign travel etc. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date from | | | | | Date to | | | | | | | | | Reason for break | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **/  /** | | | | | **/  /** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Secondary school education** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If you are shortlisted for interview you will be asked to provide evidence of your qualifications relevant to the role. **Please start with the most recent.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| School(s) | | | | | Dates from | | | | | | | | | Dates to | | | | | | | | | | Qualification/subject obtained and awarding body | | | | | | | | | | Grade | | | | | | | | Dates | | | |
|  | | | | | **/  /** | | | | | | | | | **/  /** | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | **/  /** | | | |
| 1. **Continuing education** (University/College/Apprenticeships etc) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If you are shortlisted for interview you will be asked to provide evidence of your qualifications relevant to the role. **Please start with the most recent.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Educational establishments | | | | | Dates from | | | | | | | | | Dates to | | | | | | | | | | Qualification/subject obtained and awarding body | | | | | | | | | | Level/ Grade | | | | | | | | Dates | | | |
|  | | | | | **/  /** | | | | | | | | | **/  /** | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | **/  /** | | | |
| 1. **Professional qualification** (including details of professional association membership) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you hold Qualified Teacher Status (QTS)? | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | No | | | | | | DfE number | | | | | | | | | | | | |
| If yes, please complete the following: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you completed an induction year? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | | | | No | | | | | | |
| 1. **Other training relevant to the job (e.g. short courses, personal development, special projects)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date | | | | Organising body | | | | | | | | | | | | | | | Brief description of course content | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **/  /** | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Supporting information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| You must provide clear and concise evidence in this section of how you meet the essential and desirable criteria set out in the person specification.  To demonstrate you meet the criteria you may wish to tell us about relevant things you have been responsible for or involved in, what you have achieved and any feedback given. You can include examples from paid or unpaid work or other activities you have undertaken in your personal life that are relevant to the job you are applying for.  It is only information contained in this application which will decide whether you are shortlisted for interview (unless documents have been specifically requested in the recruitment information). Any additional information provided where this is not required will be disregarded.  If you consider that you have a disability as defined by the Equality Act 2010 (see Appendix 2) and you provide evidence in your supporting information that you meet the minimum (essential) criteria for the job, you will be invited for interview. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **References** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If you are shortlisted, referees **will be** contacted prior to interview.  Please give details of two referees, one of whom must be your present and/or last employer and the other from a previous employer. Your referees must have knowledge of your work and character. In the case of applicants leaving full time education or not having worked since doing so, the Head of School, College or University should be one of the named referees. We do not accept references from friends or family members. To ensure your application is processed without undue delay, we will be contacting your referees by email - please provide full details of your referees including email address. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Referee 1 details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Referee type\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Current employer | | | | | |  | | | Previous employer | | | | | | | | | | | | | | | |  | | Academic | | | | | | | | | | | | | | | | | |  |
| Title\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mr |  | | Mrs | | |  | | | | | Ms | |  | | | Miss | | | | | | |  | | | Other (please specify) | | | | | | | | | | | | | |  | | | | | |
| First name\* | | | | | | | |  | | | | | | | | | | | | | Surname\* | | | | | | | | | | | |  | | | | | | | | | | | | |
| Organisation\* | | | | | | | |  | | | | | | | | | | | | | Position held\* | | | | | | | | | | | |  | | | | | | | | | | | | |
| Address (including postcode)\* | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone number\* | | | | | | | |  | | | | | | | | | | | | | Business email address\* | | | | | | | | | | | | | | | |  | | | | | | | | |
| **Referee 2 details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Referee type\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous employer | | | | | | | |  | | | | | | | | | | | | | | Other (please specify) | | | | | | | | | | | |  | | | | | | | | | | | |
| Title\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mr |  | | Mrs | | |  | | | | | Ms | |  | | | Miss | | | | | | |  | | | Other (please state) | | | | | | | | | | | |  | | | | | | | |
| First name\* | | | | | | | |  | | | | | | | | | | | | | Surname\* | | | | | | | | | | | |  | | | | | | | | | | | | |
| Organisation\* | | | | | | | |  | | | | | | | | | | | | | Position held\* | | | | | | | | | | | |  | | | | | | | | | | | | |
| Address (including postcode)\* | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone number\* | | | | | | | |  | | | | | | | | | | | | | Business email address\* | | | | | | | | | | | | | | | |  | | | | | | | | |
| 1. **Arrangements for people with disabilities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you consider that you have a disability as defined by the Equality Act 2010? (See Appendix 2)\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No | |
| If you consider that you have a disability as defined by the Equality Act 2010 (see Appendix 2) and you provide evidence in your supporting information that you meet the minimum (essential) criteria for the job, you will be invited for interview.  If you are shortlisted for interview you will have the opportunity to advise us of any reasonable adjustments needed for you to participate effectively in the selection process. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Asylum and Immigration Act 1996** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you require a visa to work or study in the UK?\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No | |
| For further information on the visa requirements to work in the UK see www.ukba.homeoffice.gov.uk | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Please confirm the following statements are true by signing the box below.

**Declaration**

I understand that any offer of employment will be subject to the information on this application form being complete and correct. I authorise individuals involved in the recruitment process to make any appropriate checks which may be necessary in relation to the job I have applied for.

False information, or a failure to supply the details required in this application form could make an offer of employment invalid or lead to termination of employment.

**Disclosure of Criminal Convictions and Rehabilitation of Offenders Act 1974 and Barred List Checks**

The appointment of any member of staff who may have contact with, or access to children or vulnerable adults will be subject to a satisfactory disclosure being issued by the Disclosure and Barring Service (DBS). Where a post meets the eligibility criteria under the Protection of Freedoms Act 2012 for an Enhanced check for regulated activity, this check will be required. An Enhanced DBS check will be required where the criteria of Schedule 4 under the Safeguarding and Vulnerable Groups Act 2006 is met.

Where jobs are exempt from the Rehabilitation of Offenders Act 1974 all cautions and bind overs, including those regarded as ‘spent’, must be declared.  However, the amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers, and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found at the Disclosure and Barring Service website<https://www.gov.uk/government/publications/filtering-rules-for-criminal-record-check-certificates>. The presence of a criminal record will not necessarily prevent employment.

Please make the following declaration and tick the appropriate box.

|  |  |  |
| --- | --- | --- |
| **I have information to declare\*** | Yes | No |
| **If yes, please provide the date(s) and the detail of the criminal conviction(s) on Appendix 4. If you are applying by post, place this in a separate envelope to your application form and write your name, post you are applying for and job reference number on the envelope before attaching it to your application form. If you are returning your application by email, send the conviction information in a separate email using the details on the advert.** | | |

**Safer recruitment**

I certify that I am not disqualified from working with children or subject to sanctions imposed by a regulatory body which would restrict me from applying for this post.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **I have read and confirm my agreement to the above declarations\*** | | | | Yes |
| **Signature** |  | **Date** | **/  /** | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Logo (2)  **Recruitment Monitoring Form** | | | | | | | | | | | | | | | |
| **Help us to help you**  The recruiting establishment is committed to achieving fairness and equality in employment judging candidates solely on their skills and ability to do their job and working towards a workforce which represents the local population. The following information helps us identify the groups we are attracting applications from, and assists in workforce planning, including recruiting and training future workforce entrants.  To help us monitor the reality of our diversity policy please complete this monitoring form.  We cannot assess the effectiveness of our policy without it.  The information supplied in this section is strictly confidential and does not form part of your application and will be accessed by authorised persons only (see Appendix 1). | | | | | | | | | | | | | | | |
| **Post title** | |  | | | | | | | **Post reference** | | |  | | | |
| Are you currently employed by Norfolk County Council? | | | | | | | | | | | | | | Yes | No |
| **Gender\*** | |  | Male | | | | | | | | |  | Female | | |
|  | |  | Living in a gender that is different from the one assigned at birth | | | | | | | | |  | Prefer not to disclose | | |
| If you have a gender recognition certificate, please select the gender on the certificate. | | | | | | | | | | | | | | | |
| **Nationality\*** | | | | | | | | | | | | | | | |
|  | British | | | |  | | Bulgarian |  | | | Hungarian |  | Indian | | |
|  | Latvian | | | |  | | Lithuanian |  | | | Polish |  | Portuguese | | |
|  | Australian | | | |  | | South African |  | | | American |  | Prefer not to disclose | | |
|  | Other | | | |  | |  |  | | |  |  |  | | |
| If you feel the choices do not provide a suitable option please write how you would describe your nationality | | | | | | | | | | |  | | | | |
| **Country of birth\*** | | | | | | | | | | | | | | | |
|  | Britain | | | |  | | Bulgaria |  | | | Hungary |  | India | | |
|  | Latvia | | | |  | | Lithuania |  | | | Poland |  | Portugal | | |
|  | Australia | | | |  | | South Africa |  | | | America |  | Prefer not to disclose | | |
|  | Other | | | |  | |  |  | | |  |  |  | | |
| If you feel the choices do not provide a suitable option please write how you would describe your country of birth | | | | | | | | | | |  | | | | |
| **Year of entry into the UK\*** | | | | | |  | | | | | Date of initial entry to the UK (First date you entered or year of birth if you have always lived here) | | | | |
| **Religion/belief\*** | | | | | | | | | | | | | | | |
|  | Buddhist | | | |  | | Hindu |  | | | Muslim |  | No religion | | |
|  | Christian | | | |  | | Jewish |  | | | Sikh |  | Prefer not to disclose | | |
|  | Other | | | |  | |  |  | | |  |  |  | | |
| If you feel the choices do not provide a suitable option please write how you would describe your religion | | | | | | | | | | |  | | | | |
| **Marital status\*** | | | | | | | | | | | | | | | |
|  | Single | | | |  | | Cohabiting |  | | | Married |  | Civil partnership | | |
|  | Separated | | | |  | | Divorced |  | | | Widowed |  | Prefer not to disclose | | |
| **Your sexual orientation\*** | | | | | | | | | | | | | | | |
|  | Bisexual | | | |  | | Gay man/ lesbian woman |  | | | Heterosexual |  | Prefer not to disclose | | |
| **Your ethnic origin\*** | | | | | | | | | | | | | | | |
| **White** | | | | | | | | | | | | | | | |
|  | British | | | |  | | European |  | | | Gypsy/Roma |  | Irish | | |
|  | Traveller/Irish heritage | | | |  | | Other |  | | |  |  |  | | |
| **Mixed** | | | | | | | | | | | | | | | |
|  | White and Asian | | | |  | | White and black Caribbean |  | | | White and black African |  | Other | | |
| **Asian or Asian British** | | | | | | | | | | | | | | | |
|  | Indian | | | |  | | Bangladeshi |  | | | Pakistani |  | Other | | |
| **Black or black British** | | | | | | | | | | | | | | | |
|  | Caribbean | | | |  | | African |  | | | Other |  | | | |
| **Other ethnic background** | | | | | | | | | | | | | | | |
|  | Chinese | | | |  | | Arab |  | | | Other | Prefer not to disclose | | | |
| If you feel that none of the choices provide a suitable option please write how you would describe your ethnic origin | | | | | | | | | | |  | | | | |
| **Your disabled status** | | | | | | | | | | | | | | | |
| Do you consider that you have a disability as defined by the Equality Act 2010? (See Appendix 2)\* | | | | | | | | | | | | | | Yes | No |
| I may require reasonable adjustments to be implemented\* | | | | | | | | | | | | | | Yes | No |
| If I have indicated yes above and I am offered the job, I give my consent for my manager to be advised that I would like a meeting to be arranged to discuss adjustments with me in more details. | | | | | | | | | | | | | | Yes | No |
| **Information about arrangements to discuss reasonable adjustments** | | | | | | | | | | | | | | | |
| You will be contacted to arrange a convenient time for you to meet to discuss the reasonable adjustments you may need in order to carry out the role, and for you to discuss any issues or concerns you may have.  It would be helpful if you could consider what sort of adjustments may assist you in the role before this meeting but if you are not sure about this, or do not identify everything you might need at the meeting don't worry.  Once you have taken up your role, your manager will give you the opportunity to discuss further adjustments. | | | | | | | | | | | | | | | |
| **Signature** | | | |  | | | | | | **Date** | | | | **/  /** | |

**Appendix 1**

**Data Protection Notice**

Norfolk County Council regards the lawful and fair treatment of personal information as very important to successful operations and to maintaining confidence between those with whom we deal and ourselves.

**What information will we collect and how will we use it?**

We will collect personal data (such as your name and contact details) and sensitive personal data which is defined under the Data Protection Act 1998 as racial or ethnic origin, political opinions, religious beliefs, trade union membership, physical or mental health, sexual life, commission or alleged commission of any offence, proceedings for any offence committed or alleged to have been committed**.**

Any personal data that is collected on this site, including any sensitive personal data, will be collected and processed in accordance with the Data Protection Act 1998.

**Personal data will be stored, processed, used and disclosed by us in the ways outlined below.**

* To enable you to apply online for jobs or to subscribe to alerts of posts which are of interest to you
* For recruitment, employment and monitoring purposes including obtaining references from third parties
* To assess data you have provided against other vacancies which it is felt may be suitable for you
* Shared with third parties where we have retained them to provide services or functions on our behalf, such as professional advisors / consultants, providers of disclosure and barring services for criminal conviction and barred list checks, tests forming part of the recruitment process e.g. psychometric evaluation or skill test
* Individuals not employed by NCC who are involved in the recruitment process such as partner organisations or other stakeholders
* Shared with another party in the following circumstances:
  + To investigate or prevent fraud
  + As permitted by law
  + With your consent

**Anonymised sensitive personal data will be used for:**

* Monitoring, analysing and reporting on equalities data
* Assisting us to take action to prevent inequalities
* Developing our policies and processes to take account of the diverse needs of our employees

**How we collect and use information about applicants to our websites**

We collect anonymised information about the way applicants use this website to understand our users better, and to identify trends and popular pages for development purposes to improve our site. This data may be shared with third parties to support these improvements.

**Information Retention**

Your personal data will be retained for a minimum period of 6 months from the closing date before being removed from the system. Further consideration of applications may occur within 6 months of the closing date where it is identified the details match other suitable vacancies. You can request earlier removal of your personal data from the system, or request a copy of the personal data that Norfolk County Council holds about you, by emailing the address below.

**Further Details**

For further information on Norfolk County Council’s data protection policy see the Data Protection section of the Council and Democracy section of our website. If you wish to contact us with respect to the above matters please email us at [**information@norfolk.gov.uk**](mailto:information@norfolk.gov.uk)**.** This is not a secure email address so please do not include personal information in an email to this address.

**Appendix 2**

**The Equality Act 2010** makes it unlawful for employers to discriminate against current or prospective employees for a reason relating to their disability. They must make reasonable adjustments in order not to place a disabled person at a substantial disadvantage.

The Equality Act describes a disability as ‘physical or mental impairment, which has substantial and long term adverse effect on a person’s ability to carry out normal day to day activities.’

The definition is intended to cover all forms of physical and mental disability, including sensory impairment, learning disabilities and mental illness (that are clinically well-recognised conditions). It includes people who have a disability where the condition is likely to last longer than 12 months, has occurred in the past or is likely to recur. Progressive conditions such as multiple sclerosis, cancer or HIV are covered by the Equality Act from the point of diagnosis.

The following are examples of impairments or long term conditions that could be considered a disability under this definition. It is not an exhaustive list but is intended to give you a guide as to what might be included:-

|  |  |
| --- | --- |
| * Limited physical mobility * Hearing impairment * Upper limb disorders (e.g. repetitive strain) * Long term back/neck problems * Severe facial disfigurement * Muscular dystrophy * Severe allergies (not seasonal) * Sight impairment that cannot be corrected by glasses or contact lenses * Manic depressive illness * Severe agoraphobia | * Epilepsy * Heart/circulation complaints * Learning disability * Arthritis * Multiple sclerosis * Speech impairment * Schizophrenia * Dyslexia * Crohns Disease * Diabetes |

If you are still not sure if your condition is a ‘disability’ for this purpose, you might like to answer these questions.

Is your condition likely to last longer than 12 months or be something that will recur in the future?

Yes

No

If you were not taking regular medication or treatment as appropriate would your condition have more than a minor or trivial impact on your ability to carry out normal day-to-day functions?

Your condition **would not** normally be defined as a disability for these purposes.

Yes, it has a substantial effect

Your condition **would probably be** defined as a disability for these purposes

Here is a list of day-to-day activities to help you consider whether you may be adversely affected.

|  |  |  |  |
| --- | --- | --- | --- |
| **Mobility** – moving unaided from place to place  **Manual dexterity** – use of the hands, Physical co-ordination  **Perception of the risk of physical danger**  **Ability to lift, carry or move everyday objects**. | | **Memory or the ability to concentrate, learn or understand**  **Speech, hearing, sight** (but not if it can be corrected by wearing glasses or contact lenses)  **Continence** | |
| For office use only. | | | |
|  | Shortlisted |  | Appointed |

**Appendix 4**

|  |  |  |  |
| --- | --- | --- | --- |
| Logo (2)  **Details of criminal convictions** | | | |
| First name |  | Surname |  |
| Post applied for |  | Reference number |  |
| Date | Details of conviction information | | |
| **/  /** |  | | |