Survivors Manchester asks all applicants to complete the information below fully and to the best of your ability. Once complete, please return it by email **by the closing date** to:

[info@survivorsmanchester.org.uk](mailto:info@survivorsmanchester.org.uk)

Please note that all applications received after the closing date will be automatically rejected as standard practice and without exception, in the interests of fair process.

Successful applicants will be required to attend an interview and there are a number of mandatory training sessions that all workforce must attend, both in small groups and individually.

Most positions within Survivors Manchester will require an enhanced DBS check which will need to be conducted prior to undertaking the role. References will be requested after a provisional offer is made and a start date will not be issued to successful candidates until all references have been received and checked.

Survivors Manchester is fully committed to anti-oppressive practice, including support the rehabilitation and reintegration of offenders, and positively welcomes applications from male survivors; BME and LGBT communities; those with lived experience; and those with English as a second language or Sign Language.

For further information please go to [www.survivorsmanchester.org.uk](http://www.survivorsmanchester.org.uk)

Survivors Manchester is a founding member of the Male Survivors Partnership (UK) and committed to adhering to the Male Service Standards (UK) for quality assurance in male survivor service delivery.

The first section of this form contains all your personal and referee details and will be numbered and separated from the second part of the form on receipt.

The second part of the form will be used for shortlisting and further process for interview. This process meets best practice in equal opportunity recruitment.

**Please ensure that you complete the following forms that will support your application:**

* Diversity Monitoring Form
* Consent to Check Form

**Section 1: Personal Details**

|  |  |
| --- | --- |
| **Candidate No:** (Office Use) |  |

|  |  |
| --- | --- |
| **Position Applied For:** |  |

|  |  |
| --- | --- |
| **Surname:** |  |
| **First name(s):** |  |
| **Date of Birth:** |  |
| **Home address:** |  |
| **Postcode:** |  |
| **Home Tel:** |  |
| **Mobile Tel:** |  |
| **Email:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Please indicate your preferred method of contact** | | | |
| Postal Address | Telephone | Mobile | Email |

|  |  |
| --- | --- |
| **Current Notice Period:** |  |

|  |  |
| --- | --- |
| **Where did you hear about the vacancy?:** |  |

|  |  |
| --- | --- |
| **Eligibility to work in the UK:** | To comply with legislation, all candidates must provide documentary evidence of their right to work in the United Kingdom |

|  |  |  |
| --- | --- | --- |
| Are you legally permitted to work in the United Kingdom | Yes | No |

**Criminal Records**

For all client facing positions we require you to complete a Self-Declaration Form.

For some roles we also require a Disclosure Barring Scheme (DBS) Disclosure.

Having a criminal record will not necessarily bar you from working with Survivors Manchester but this will depend on the nature of the opportunity sought and the circumstances and background of the offence.

For more details an informal chat or to have any queries you may have answered, please contact admin on 0161 236 2182 or email [admin@survivorsmanchester.org.uk](mailto:admin@survivorsmanchester.org.uk)

If you do not consent to these checks being carried out, or if consent is withheld, we will unfortunately be unable to proceed with your application.

Survivors Manchester is unable to work with anyone who is under investigation for or has a conviction for any sexual offence. Therefore, we are unable to proceed any applications from individuals with the same parameters.

|  |  |  |
| --- | --- | --- |
| **Do you have any unspent criminal convictions?** | Yes | No |

|  |  |  |
| --- | --- | --- |
| **Are you prepared to complete a Self-Declaration Form and DBS if needed?** | Yes | No |

**Declaration**

**TO BE COMPLETED BY ALL APLICANTS**

I certify the information provided in this application (and any further information enclosed), is correct and complete.

I accept that providing deliberately false information may result in my dismissal, if I am appointed.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed:** |  | **Date:** |  |

**Privacy Notice for Applicants**

**Data Controller**

The data controller is: Survivors Manchester

P.O Box 4325

Manchester

M61 0BG

**Why We Collect and Use Your Data**

The information you provide when applying for a post here / agreeing to work here will be used in the following ways:

* To recruit and appoint our staff
* To support and manage our staff and to discharge our contractual obligations
* To maintain our accounts and records, including payroll
* To manage our activities
* To fulfil our legal obligations, including checking your right to work and engaging with HMRC over income tax and national insurance

If you are not willing to provide all the information requested, we will be unable to process your application.

**Data Governance**

We will hold and take care of your information you understand:

* that in considering my application, Survivors Manchester will treat the information given in this form in confidence;
* not disclose information to any third party without my prior agreement;

I understand my right to request to see all the information held about me on any record at Survivors Manchester.

It is our policy to retain details of all unsuccessful applicants for positions at Survivors Manchester for six months from the date of the advertisement.

If you do not wish us to retain your details in this way, please let us know and we will dispose of your application form

**Section 2: Application**

|  |  |
| --- | --- |
| **Candidate No:** (Office Use) |  |

|  |  |
| --- | --- |
| **Position Applied For:** | Clinical Lead |

**2a. Training & Education**

Please detail your training and education experience, starting with the most recent and include any CPD you have undertaken *(attached separate sheet if necessary)*

|  |  |  |
| --- | --- | --- |
| **Dates**  **(From > To)** | **Name of Education Provider**  **and Course Name** | **Qualification/ Grade Attainment** |
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**2b. Employment**

Please state all the paid or unpaid work you have undertaken and help us understand any gaps there may be by accounting for them.

Please continue a separate sheet stating clearly which section of the form you are continuing and include your name.

|  |  |  |
| --- | --- | --- |
| **What is your current occupation?** | | |
| Employed | Unemployed | Retired |
| Self Employed | Student | Other |

|  |  |
| --- | --- |
| **What is your current job role and which company do you work for?** | |
| **Employment Date:** |  |
| **Organisation:** |  |
| **Contact:** |  |
| **Work Address:** |  |
| **Postcode:** |  |
| **Role:** |  |
| **Current duties and responsibilities:** |  |
| **Reason for leaving:** |  |

|  |  |
| --- | --- |
| **Dates (from/to):** |  |
| **Organisation:** |  |
| **Role** |  |
| **Duties and responsibilities** |  |
| **Reason for leaving:** |  |

|  |  |
| --- | --- |
| **Dates (from/to):** |  |
| **Organisation:** |  |
| **Role** |  |
| **Duties and responsibilities** |  |
| **Reason for leaving:** |  |

|  |  |
| --- | --- |
| **Dates (from/to):** |  |
| **Organisation:** |  |
| **Role** |  |
| **Duties and responsibilities** |  |
| **Reason for leaving:** |  |

|  |  |
| --- | --- |
| **Dates (from/to):** |  |
| **Organisation:** |  |
| **Role** |  |
| **Duties and responsibilities** |  |
| **Reason for leaving:** |  |

|  |  |
| --- | --- |
| **Dates (from/to):** |  |
| **Organisation:** |  |
| **Role** |  |
| **Duties and responsibilities** |  |
| **Reason for leaving:** |  |

**2c. Professional Statement**

A job role is supplied with all applications containing information on the main requirements of the role, along with the essential and desirable qualities of the individual(s) working in that role(s). Please provide, in the box below, a written statement evidencing your suitability to the role based on your qualities to match the role.

|  |
| --- |
|  |

*Please continue on a separate sheet if necessary (max 2 sides of A4)*