

**PRIVATE &  
CONFIDENTIAL**



**Shekinah Mission (Plymouth) Limited  
Registered Charity No. 1097409**

**APPLICATION FOR EMPLOYMENT**

Please read this application form, the Job Description, and the Person Specification, carefully before completing this form.

Answer all applicable questions honestly and truthfully.  
Read the declaration and Consent under the GDPR and the Data Protection Act.  
Ensure that you sign and date the form.

The completed form should be returned to:

[Peter.Woad@shekinah.co.uk](mailto:Peter.Woad@shekinah.co.uk)

- or in an envelope marked 'CONFIDENTIAL' to:

**The Human Resources Department  
Shekinah Mission  
Kings Road  
Plymouth  
PL1 3SF**

All applicants who meet the requirements advertised will be given fair and equal consideration, regardless of gender, race, colour, creed, nationality, ethnic origin, martial status, sexual orientation, religion, age or disability.

This form must be completed in full. If a question is not applicable, please write 'N/A' in the space provided. For enquiries and / or further information, please write to us at the above address, or contact us as follows:

Telephone: 01752 203480  
E-mail: peter.woad@shekinah.co.uk  
Website: www.shekinah.co.uk

**PERSONAL DETAILS**

Title & full name \_\_\_\_\_

Home address \_\_\_\_\_

\_\_\_\_\_

Contact address (if different from above) \_\_\_\_\_

\_\_\_\_\_

Home telephone no. \_\_\_\_\_

Work telephone no. \_\_\_\_\_

Mobile telephone no. \_\_\_\_\_

E-mail address \_\_\_\_\_

How did you learn of this post? \_\_\_\_\_

When is the earliest you could begin this job? \_\_\_\_\_

If selected, when would you be available for interview? \_\_\_\_\_

Post applied for \_\_\_\_\_

If offered this job, will you continue to have any other employment? (If yes, please give details.)

\_\_\_\_\_

**LEGAL ELIGIBILITY (please tick appropriate box)**

	<b>YES</b>	<b>NO</b>
Are you legally eligible for employment in the U.K?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have proof of eligibility?	<input type="checkbox"/>	<input type="checkbox"/>
Do you require a Work Permit to work in the U.K? If yes, please give Work Permit number	<input type="checkbox"/>	<input type="checkbox"/>
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Are there any restrictions i.e. restrictive covenants from your current or previous employer which will affect your ability to work for the company? (If yes, please provide copies).	<input type="checkbox"/>	<input type="checkbox"/>
Is your time in the U.K. under any restriction? If yes, please give details	<input type="checkbox"/>	<input type="checkbox"/>

## EDUCATION, TRAINING & QUALIFICATIONS

Please give details of all education and training you have undertaken (and qualifications obtained) which are relevant to the job being applied for.

<b>Educational or training establishment</b>	<b>Length of attendance</b>	<b>Qualifications obtained</b>	<b>Grades obtained</b>

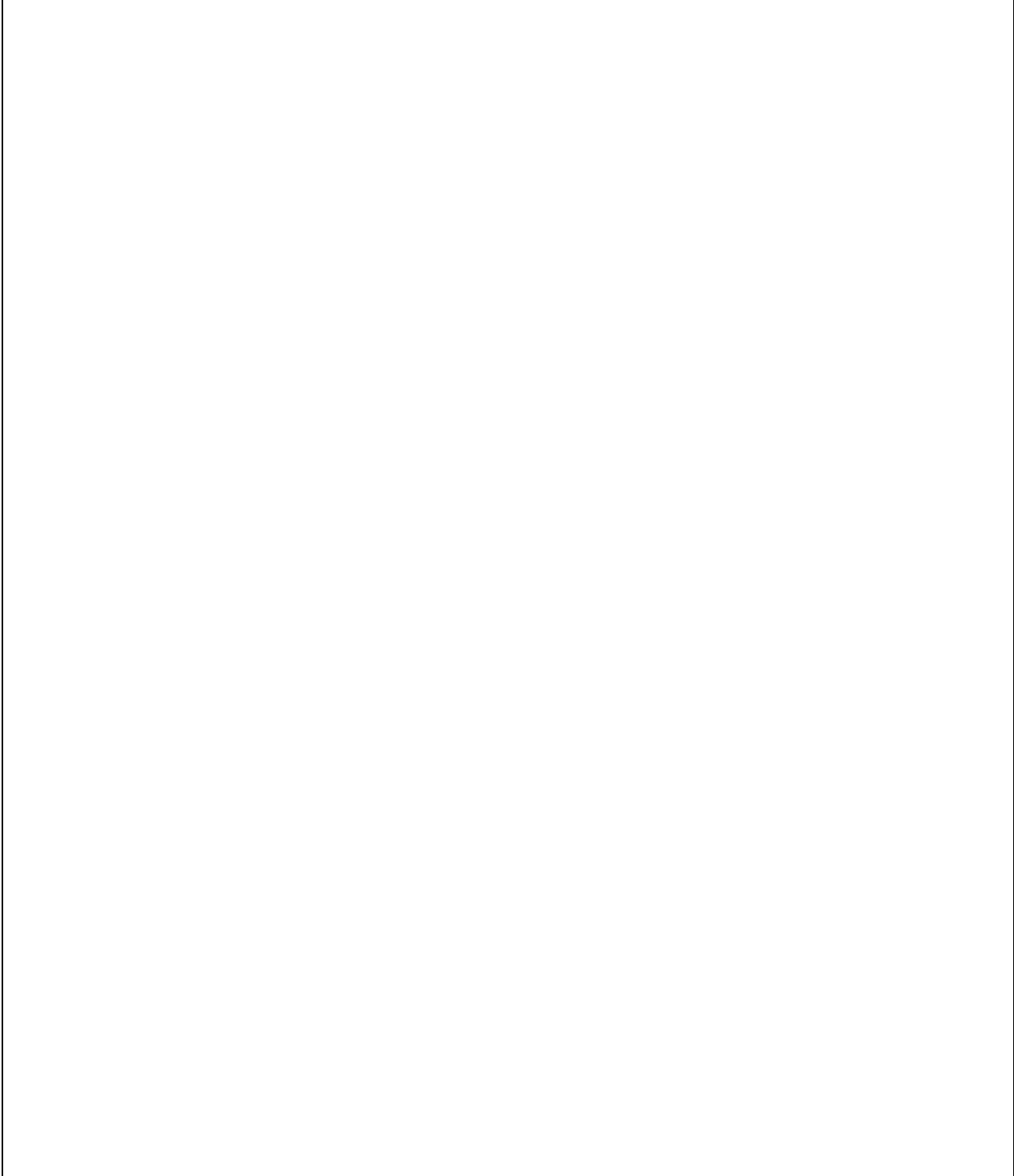
### PREVIOUS EMPLOYMENT

Please give details of your entire employment history (including voluntary work).

<b>Name, address and telephone no. of employer</b>	<b>Length of employment</b>	<b>Description of duties &amp; leaving salary</b>	<b>Reason for leaving</b>

**YOUR KNOWLEDGE & EXPERIENCE**

Please describe below how your knowledge and experience makes you suitable for this post.

A large, empty rectangular box with a thin black border, intended for the applicant to describe their knowledge and experience. The box is currently blank.

**ADDITIONAL INFORMATION**

Why are you applying for this job?

Please give any other relevant information which you feel may help your application.

## REFERENCES

Please give details of two referees, at least one of whom should be a previous (i.e. not current) employer. References from relatives will not be accepted. References will not be taken up unless we are considering offering you employment. In this event, we may request a reference from your current employer (if not already provided).

### First referee:

Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone no. \_\_\_\_\_

Email \_\_\_\_\_

### Second referee:

Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone no. \_\_\_\_\_

Email \_\_\_\_\_



**RESTRICTED**

**CRIMINAL RECORD**

The Shekinah Mission has been excepted from the Rehabilitation of Offenders Act (1974). It is a requirement of employment that all employees, before commencing work with the Mission, must disclose all previous convictions to the Mission and, as soon as is possible, undergo a Disclosure & Barring Service (DBS) Check. The Mission will not consider your application if you refuse to undergo such a check. By signing this application form, you give your agreement for the Mission to carry out a DBS Check on you, should you accept a provisional offer of employment.

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 on the DBS website. Please give details of any convictions, cautions, reprimands or final warnings that are not 'protected' as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013):

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## DECLARATION

I declare that, to the best of my knowledge and belief, the details I have given on this application form are true and accurate. I accept that my application may be discounted, or that I may be dismissed from employment at the Shekinah Mission (Plymouth) Limited, if any details are shown to be false. I hereby consent to the Shekinah Mission checking the information I have given on this form or give subsequently at interview, including my qualifications, employment history, references, and past criminal record.

I understand that the Shekinah Mission needs to collect and use certain types of information about employees, in order to operate its business and to fulfil its legal obligations under the General Data Protection Regulation and the Data Protection Act, and that the information I have provided on this application form will be used during the recruitment process, and, if appointed, will be used as part of my personnel records. I consent to the Shekinah Mission holding such information on file only for as long as it considers necessary to fulfil the purpose for which it was obtained, and to process (including disposing and destroying) it in accordance with the GDPR and the other requirements of the Act, and any other procedures laid down by the Shekinah Mission for this purpose from time to time. I understand that the Shekinah Mission will take all reasonable precautions at all times to guard information against any unauthorised access and use.

Signed \_\_\_\_\_ Date \_\_\_\_\_