Application for Employment

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| --- | --- |
| Post applied for |  |
| Please state which country(ies) you wish to be based in |  |
| Where did you see this post advertised? (Please be specific) |  |

**Personal Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Title  |  | Surname |  |
| First name(s) |  |
| Address |  |
| City |  | State |  |
| Post code/ZIP code |  | Country |  |
| Email  |  |
| Telephone Number |  |

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| Please state which country(ies) you have the right to work in? |  |
| If you have worked with us before, please state when and in what capacity. |  |

**Disclosure of Criminal Convictions**

Have you any current or unspent criminal convictions on your police record? [ ]  **Yes** [ ]  **No**

Please provide details.

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**Education and Training**

**Education and qualifications:** Please start with the most recent, including any current studies.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School/College/University | From/To | Qualifications obtained | Level /Grade | Year obtained |
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**Training courses attended:** Include any job training, as well as formal training, that is relevant to the job for which you are applying.

Course title or description Year

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**Membership of Professional or Statutory Bodies**

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| Name of Body |  |

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| --- | --- | --- | --- | --- | --- |
| 1st Registration date |  | Registration No. |  | Renewal date |  |

**Employment History**

**Current or most recent employment**

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| --- | --- |
| **Employer:** | **Job Title:**  |
| **Dates of employment:**  | **Location:**  |
| **Nature of employer’s business:**  | **Current salary:** |
| **Notice period:**  | **Reasons for leaving:** |
| **Brief description of duties:**  |

**Previous employment**  Please continue on a separate document if necessary.

|  |  |
| --- | --- |
| **Employer 1:**  | **Job Title:**  |
| **Dates of employment:**  | **Location:**  |
| **Nature of employer’s business:**  | **Reasons for leaving:**  |
| **Brief description of duties:**  |
| **Employer 2:**  | **Job Title:**  |
| **Dates of employment:**  | **Location:**  |
| **Nature of employer’s business:**  | **Reasons for leaving:**  |
| **Brief description of duties:**  |
| **Employer 3:**  | **Job Title:**  |
| **Dates of employment:**  | **Location:**  |
| **Nature of employer’s business:**  | **Reasons for leaving:**  |
| **Brief description of duties:**  |
| **Employer 4:**  | **Job Title:**  |
| **Dates of employment:**  | **Location:**  |
| **Nature of employer’s business:**  | **Reasons for leaving:**  |
| **Brief description of duties:**  |
| **Employer 5:**  | **Job Title:**  |
| **Dates of employment:**  | **Location:**  |
| **Nature of employer’s business:**  | **Reasons for leaving:**  |
| **Brief description of duties:**  |
| **Employer 6:**  | **Job Title:**  |
| **Dates of employment:**  | **Location:**  |
| **Nature of employer’s business:**  | **Reasons for leaving:**  |
| **Brief description of duties:**  |

**Skills**

**Languages:** Please specify degree of fluency: Fluent, Good, Fair, Slight Knowledge.

Language Spoken Written Read

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**Computer skills:** Please indicate your skill levels with an ‘X’ in the relevant column.

Software Basic Intermediate Advanced

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**Reasons for Application**

Please demonstratehow you meet the requirements of the person specification by providing details of your experience, skills and knowledge gained in employment, voluntary work or other experience.

We will use the information you provide to decide whether or not to shortlist you for interview.

**Please note - Your supporting statement must be no longer than two sides of A4 in Arial font, size 12.**

**References**

Please give the names of two people who are able to provide references relating to your work experience and to your suitability for the post applied. One referee must be your current or most recent employer. IPPF will not approach any referee’s unless you are offered the prositon.

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Employer name |  |
| Job title |  | Postal address |  |
| Professional relationship |  | City |  |
| Telephone number |  | Country |  |
| Email |  | Postal code/ZIP code |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Employer name |  |
| Job title |  | Postal address |  |
| Professional relationship |  | City |  |
| Telephone number |  | Country |  |
| Email |  | Postal code/ZIP code |  |

|  |  |
| --- | --- |
| I give IPPF my consent to contact my referees listed above if I am offered the position | [ ]  **Yes**  [ ]  **No** |

**Signature**

Please read the following points before signing below.

1. IPPF is a global service provider of sexual and reproductive health and rights for all. IPPF needs to ensure that you are aware of:
2. IPPF has a goal of universal recognition of a woman’s right to choose and have access to safe abortion.
3. Our work is guided by principles contained in the Code of Good Practice for NGOs Responding to HIV. If successful you will be expected to work within these guidelines.

**I confirm I have read and understood the above.** **[ ]  Yes** **[ ]  No**

1. All successful candidates will be required to produce original documentation to prove their eligibility to work in the UK.
2. By communicating the information on this form to IPPF by means of electronic communication, I hereby indicate that I intend the information on this form to be taken as bearing my signed name or signature as evidence of my intention to be bound by the form and evidence of my assertion of the veracity of the information I have provided on this form.
3. **In sending us your application form you:**
4. **confirm that the information in your application is true, complete and to the best of your knowledge it is correct. If we appoint you and later find that you have given incorrect information or deliberately left information out, we may consider this a disciplinary matter for which the outcome could be dismissal.**
5. **agree that IPPF may process the personal data for all employment related purposes in accordance with the Data Protection Act 1998.**

|  |  |  |
| --- | --- | --- |
| Signature |  | To return this form to jobs@ippf.org |
|  |  |
| Date |  |

Thank you for completing the application form. Please complete our Equal Opportunities Monitoring form on the following page.

**Equal Opportunities Monitoring**

IPPF has an Equal Opportunities Policy and wishes to monitor its effectiveness. To do this we ask applicants to supply information about their race, gender, age and disability. ***The information is confidential and is not seen by the selection panel***. The information gathered is used to show the profile of applicants we attract using different methods of recruitment and can highlight if particular groups are discriminated against at any stage in the recruitment and selection process. Thank you for your co-operation.

|  |  |
| --- | --- |
| Name |  |
| Position applied for |  |

How did you hear of the vacancy?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [ ]  Advert Publication |  | [ ]  Website | Address | www.  |
|  |  |  |  |  |
| [ ]  Agency Name |  | [ ]  Other | Description |  |

Gender [ ]  Male (inc. transman) [ ]  Female (inc. transwoman) [ ]  Non-binary or other gender identity

Age [ ]  Under 20 [ ]  20-29 [ ]  30-39 [ ]  40-49 [ ] 50-59 [ ]  60+

Within the following categories, which were those used by the National Census of Population, please describe yourself:

|  |  |  |  |
| --- | --- | --- | --- |
| **A. White** | (1) [ ]  British | (2) [ ]  Irish | (3) [ ]  Any other White background (Please provide details.) |
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| **B. Mixed** | (1) [ ]  White and Black Caribbean | (2) [ ]  White and  Black African | (3) [ ]  White and Asian | (4) [ ]  Any other Mixed background  (Please provide details.) |
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| --- | --- | --- | --- | --- |
| **C. Asian or Asian British** | 1. [ ]  Indian
 | (2) [ ]  Pakistani | (3) [ ]  Bangladeshi | (4) [ ]  Any other Asian background  (Please provide details.) |
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| **D. Black or Black British** | (1) [ ]  Caribbean | (2) [ ]  African | (3) [ ]  Any other Black background | (Please provide details.) |
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| **E. Chinese or any other ethnic group** | (1) [ ]  Chinese | (2) [ ]  Any other Ethnic group (Please provide details.) |
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**F.** **Prefer not to say** [ ]

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| Do you consider yourself to have a disability?  | [ ]  Yes [ ]  No (Please provide details.) |
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Information on this form will be held electronically.

|  |  |  |
| --- | --- | --- |
| Signature |  | To return this form with your application to jobs@ippf.org |
|  |  |
| Date |  |