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|  | Employment Application Form |

## Pre-application

**Our Mission, Values and Basis of Faith statements describe the ethos that serves as the foundation of our work. All applicants should be able to accept and support this statement and ethos. Please read these documents on our**[**Values**](https://www.tearfund.org/about_us/our_values)**and**[**Basis of Faith**](http://www.tearfund.org/en/about_you/jobs/tearfund_statement_of_faith/)**carefully before signing the application form.**

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| --- | --- | --- |
| I am committed to Tearfund’s Christian beliefs and I am in agreement with Tearfund’s Basis of Faith | YES | NO |

## Personal Details

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| --- | --- | --- | --- | --- | --- |
| Full Name\*: |  | | | | |
| Address\*: |  | | | | | |
|  |  | | | | | |
|  | City: | | | | Postcode: | |
| Telephone: | |  | Email Address\*: |  | | | |

|  |  |
| --- | --- |
| Skype Address: |  |

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| Position Applied for: |  |

## Supplementary Statement:

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| **With specific reference to the Person Specification and Job Description please tell us how your background, training and experience make you an ideal candidate for this role? (max 5,000 characters including spaces) \*** |
| **Why do you want to work for Tearfund? (max 5,000 characters including spaces) \*** |
| **Are you currently employed by Tearfund? \***  **If Yes, what is your current job title, team and location? \*** |
| If your application is successful what is the earliest date you could start employment? |
|  |

## Language Ability

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| What is your first language: |
| What other languages do you speak*? (You should indicate whether you would describe yourself as fluent, basic, conversational, other in other language(s):* |

## Faith

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| **Name of church you are currently attending. \*** |
| **How long have you attended this church? \*** |
| How are you involved in the life of this church? (max 150 words) \* |
| How does your faith affect how you live your life? (max 150 words) \* |

## Previous Employment

We require references that cover the last 5 years of your employment. The contact details of your professional referees should be the **HR department of each employer** you have had in the last 5 years.

We also require the contact details of your **current or most recent direct line manager**.

In addition, we require the contact details of a **church leader** who is willing to provide a reference.

*Please note Tearfund is a member of the SCHR Misconduct Disclosure Scheme. The core of the scheme is that participating organisations will share information in the recruitment process about safeguarding-related misconduct (i.e. sexual exploitation, sexual abuse or sexual harassment) that a candidate has been found to have committed. This information will be shared in the form of a “Statement of Conduct”. For more information on the Scheme,*[*please click here*](https://www.schr.info/the-misconduct-disclosure-scheme)

**Current/Most Recent Direct Line Manager:**

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| --- | --- | --- | --- | --- |
| **Full Name\*:** |  | | | |
| **Organisation:** |  | | | |
| **Email:** |  | | | |
| **Telephone:** |  | | | |
| In what capacity do you know this person? | | | | |
|  | | | | | |
| **May we contact your referee without further permission?** | | YES | NO |  | |
|  | |  |  |  | |
|  | |  |  |  | |

**HR Department:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Organisation:** |  | | | | |
| **Employment Dates:** |  | | | | |
| **Email:** |  | | | | |
| **Telephone:** |  | | | | |
| In what capacity do you know this person? | | | | | |
|  | | | | | | |
| **May we contact your referee without further permission?** | | | YES | NO |  | |
|  | |  | |  |  | |
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**HR Department:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Organisation:** |  | | | |
| **Employment Dates:** |  | | | |
| **Email:** |  | | | |
| **Telephone:** |  | | | |
| In what capacity do you know this person? | | | | |
|  | | | | | |
| **May we contact your referee without further permission?** | | YES | NO |  | |

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**HR Department:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Organisation:** |  | | | |
| **Employment Dates:** |  | | | |
| **Email:** |  | | | |
| **Telephone:** |  | | | |
| In what capacity do you know this person? | | | | |
|  | | | | | |
| **May we contact your referee without further permission?** | | YES | NO |  | |

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Please give the name and address of a **church leader** who has is willing to act as referee:

**Spiritual Reference:**

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| **Full Name\*:** |  | | | |
| **Email:** |  | | | |
| **Telephone:** |  | | | |
| **Church:** |  | | | |
| What is their job title/leadership position within the church? | | | | |
|  | | | | | |
| **May we contact your referee without further permission?** | | YES | NO |  | |

## Equality & Diversity

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| --- |
| **Gender:** |
| **Ethnic Origin:** |
| **Disability: Yes/No/Prefer not to say** |
| If yes, disability type: |

## Additional Information Required

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| Do you have any unspent criminal convictions? (Any unspent convictions will be considered on an individual basis, taking into account the circumstances surrounding the offence. If you have a conviction which is now considered spent, this does not have to be declared. There are, however, certain convictions and jail terms which remain unspent for life for further information please see [Rehabilitation of Offenders Act 1974](https://www.legislation.gov.uk/ukpga/1974/53)) | YES | NO |
|  |  |  |
| Do you have any relationships with another staff member in Tearfund that would fall within one of the following: spouse or partner, children, siblings, grandchildren and grandparents (whether by birth or marriage) or other significant relationship? | YES | NO |
| I**f yes**, please state their name, their role and the nature of your relationship with them. | | |
|  |  |  |
| Do you have a connection with any organisation that could result in a conflict of interest for Tearfund (please see [Conflict of Interest](https://jobs.tearfund.org/Tearfund/file/downloadfile/Conflict%20of%20Interest/Original) policy). | YES | NO |
| **If yes,** please provide further details: | | |

## Submit & Declaration

You must have the required legal capacity to enter into and be bound by these terms and conditions.

* I understand that if I am appointed this application form will become part of my personal file and that if I am not appointed, in accordance with the Data Protection Act, all manual and electronic records will be deleted after a period of one year from all relevant files.
* All individuals I have listed as referees have agreed to act as my referees.
* I am aware that any formal offer of employment may be subject to clearance from the Criminal Records Bureau/Police Check.
* I confirm that to the best of my knowledge all the facts set out in this application are true and complete. I understand that any fabrication may lead to disqualification from the selection process or dismissal if appointed.

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| Signature: |  | Date: |  |