

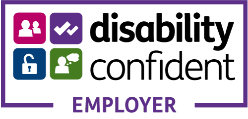
**South Yorkshire Fire & Rescue**

**Operational Transfer In**

**Application Form**

**Please return all completed application forms to:**

recruitment@syfire.gov.uk



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**Introduction**

Thank you for expressing an interest in applying for an Operational Transfer In to South Yorkshire Fire & Rescue.

You are advised that the information you provide will be checked and as such will contribute to our decision as to whether to take your application further.

Under the Rehabilitation of Offenders Act 1974 you are obliged to declare any unspent convictions or criminal proceedings pending. This will be checked before any final formal offer of employment is made.

**Information about the Application Form**

* Please ensure you are available during the required assessment period of this Operational Transfer In process before applying. The selection process is likely to run between the **14th and the 22nd June 2021.**
* Please complete the form electronically and submit this via email. If you have any issues completing the form in this way please get in touch.
* Read through your completed form carefully to ensure you have completed all required sections and have not missed anything out and that it is clearly and accurately presented. Continue on additional sheets if needed. The decision to invite you to the next stage will be based on the information you give us on this form.
* Failure to provide accurate and complete information may result in your application being rejected.
* **Prior to completing this form please ensure that you meet all of the eligibility criteria as detailed. If you are unable to demonstrate this your application will be rejected. If you have any queries on this please fie in touch via email at** [recruitment@syfire.gov.uk](mailto:recruitment@syfire.gov.uk).
* In line with the above please be aware that Applications will only be accepted for transfer of permanent contract staff serving on a wholetime duty system on a permanent basis within a UK Fire & Rescue Service. SYFR is not accepting applications from military or airport services at this time. Firefighter applicants must be competent in role to apply at this time.
* Please note that, as part of the referencing process for this transfer process, we will request a reference from your immediate line manager for your transfer.
* If, after reading through the recruitment material, you have any remaining questions, please feel free to contact a member of the HR team at [recruitment@syfire.gov.uk](mailto:recruitment@syfire.gov.uk) using the reference Operational Transfer In.
* Data Protection Act – The information given on this form will only be used for recruitment and selection purposes and will be stored confidentially and disposed of in line with Data Protection principles.

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| **Role/Transfer Process applied for** (please place an X in the relevant box): | |
| Firefighter Transfer (Competent Firefighter) |  |
| Crew Manager Transfer (Development or Competent) |  |
| Watch Manager Transfer (Development or Competent) |  |
| ***Please note that you must be in a permanent post at the above level in order to apply to transfer (with the exception of those with a valid promotional ticket at the higher level).*** | |

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| **Personal details** | | | | | | |
| Title |  | | | | | |
| First name(s) |  | Middle name(s) | | |  | |
| Surname |  | | | | | |
| Date of Birth |  | National Insurance No. | | | |  |
| First line of address |  | | | | | |
| Town/ City |  | | | | | |
| County |  | Post Code | |  | | |
| Email address |  | | **Please note** that email will be the primary method of contact. If you do not have an email address please contact us for further guidance. | | | |
| Preferred contact number |  | Additional contact number | | | |  |
| Do you require a work permit to work in the UK? (Yes/No) |  | If yes, do you currently hold a valid work permit? | | | |  |

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| **Additional details** |
| Please state if you have any specific requirements / disabilities (e.g. dyslexia) so that we can contact you to ensure we make appropriate arrangement for you during any selection process. |
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| **Rehabilitation of Offenders** | | | | |
| Do you have any criminal convictions not considered spent under the Rehabilitation of Offenders Act 1974? (Please insert an X to indicate your chosen option) | Yes |  | No |  |
| If yes, please give details |  | | | |
| Do you have any pending cases?  (Please insert an X to indicate your chosen option) | Yes |  | No |  |
| If yes, please give details |  | | | |

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| **Abatement** | | | | |
| Under The Firefighters Pension Scheme (England) (Amendment) (No.2) Order 2013 SYFR are obligated to identify as to whether abatement of a Firefighters Pension will apply. | | | | |
| Are you in receipt of a Firefighters Pension?  (Please insert an X to indicate your chosen option) | Yes |  | No |  |
| If yes, please state from which authority.  *You may wish to check with your fire authority if abatement would apply if you were successful for this role.* |  | | | |

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| **Employment History & Fire Service Employment** | | | | | | | |
| Total UK Fire & Rescue length of service | Years (approx.) | |  | | | | |
| Current Employer - UK Fire & Rescue Service |  | | | | | | |
| Current Wholetime Duty System |  | | | | | |  |
| Current Substantive/Permanent Contract Role |  | | | | | |  |
| Current Temporary Role (if applicable) |  | | | | | |  |
| Current competence status (e.g. Crew Manager Competent or Watch Manager Development) |  | | | | | |  |
| Please state your order of preference for the available SYFR duty systems by placing the figures 1, 2 and 3 in the relevant box (1 being your most preferred option) | 224 System | | Day Staffing System | | Operational Resourcing Team | | |
| Have you ever been dismissed from any role? | Yes |  | | No | |  | |
| If yes, please give details |  | | | | | | |
| Are you currently subject to any informal or formal development plan(s) within your current role? | Yes |  | | No | |  | |
| Are you currently subject to any live disciplinary sanctions within your current role? | Yes |  | | No | |  | |
| **Please state below any other information which you feel is pertinent to your application along with a brief description of your reasons for seeking a transfer** (you may attach any additional information to your form if required) | | | | | | | |
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| **Fire Service Training Information** | | | | | |
| Please confirm that you are ‘in ticket’/up to date in all core skills as specified below | Yes |  | | No |  |
| Please state the date you last undertook initial or refresher training in the below subjects: | **Insert Date Below**  (If you have attended refresher training but do not have the date of your initial training then leave the initial box blank) | | | | |
| **INITIAL** | | **REFRESHER** | | |
| Breathing Apparatus |  | |  | | |
| Road Traffic Collision |  | |  | | |
| Working at Height |  | |  | | |
| Emergency Fire Appliance Driving (If EFAD Qualified) |  | |  | | |
| Incident Command Level 1 (Accredited) (CMs & WMs ONLY) |  | |  | | |
| Internal Supervisory Incident Command (or equivalent) (CMs & WMs ONLY) |  | |  | | |

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| **Other Qualifications/Training** |
| If you have any additional qualifications (including instructor qualifications or training in any specialist areas) please details these below: |
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| **IFE Examinations** | | |
| **Please confirm which IFE examinations you have passed** (please place an X in the relevant boxes) | | |
| Level 3 Certificate – Unit 1: Fire Engineering Science (Non Mandatory for CM/WM) | |  |
| Level 3 Certificate – Unit 2: Fire Operations (Mandatory for CM) | |  |
| Level 3 Certificate – Unit 3: Fire Safety (Mandatory for CM within 2 years of commencing role) | |  |
| Level 3 Certificate – Unit 4: Management & Administration in FRS (Mandatory for CM) | |  |
| Level 3 Diploma – Unit 6: Fire Service Operations & Incident Command (Mandatory for WM) | |  |
| Please list any other IFE Examinations that you have passed |  | |
| **Please note,** you will be required to provide certificates at the Assessment Day for any exams mandatory for the role you are applying to transfer in to. | | |

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| **Driving Information** | | | | | | |
| Do you hold a full UK driving licence? | Yes |  | No |  | No, but willing to undertake |  |
| Do you hold a LGV / HGV Licence? | Yes |  | No |  | No, but willing to undertake |  |
| If yes to either of the above, which category? |  | | | | | |

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| **Supplementary Information** | | | | |
| Are you related to any employee of SYFR or the South Yorkshire Fire Authority? | Yes |  | No |  |
| If yes, please provide their name & relationship to you |  | | | |
| Is there any reason you are aware of that you should not be employed by South Yorkshire Fire & Rescue? |  | | | |

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| **Reference Information** |
| Please note that a reference, information in relation to sickness records and confirmation of training and qualifications details, will be requested from your current employing fire service for verification prior to any final offer of employment being made. |

*If submitting your application electronically please note that you will be asked to sign the below declaration at a further stage in the process.*

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| **Declaration** | | | |
| I declare that all the information provided by me on this form is correct. I understand that my application may be rejected or dismissed if I have given false information or withheld any relevant details. I declare the form has been completed by myself only. | | | |
| **Signed** |  | **Date** |  |

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| Please send this completed application forms to [recruitment@syfire.gov.uk](mailto:recruitment@syfire.gov.uk) by the closing date  **12:00** **on Thursday 3rd June 2021** |

**EQUALITY & DIVERSITY MONITORING FORM**

South Yorkshire Fire & Rescue is an equal opportunities employer and is determined to ensure that:

* The workforce reflects the diverse society which it serves and that the working environment is free from any form of harassment, intimidation, bullying or victimisation.
* All job applicants and employees will be treated fairly and will not be discriminated against on the grounds of race, ethnicity or nationality, sex, gender reassignment or marital or civil partnership status, disability, age, sexual orientation, religion or belief, trade union activities or political belief.
* No job applicant or employee is disadvantaged by conditions or requirements which cannot be justified by the requirements of the job.

**The information on this form is for monitoring purposes only and forms no part of the selection process.** It will be detached from your application on receipt and will not be made available to those assessing your application. The information supplied will be treated in the strictest confidence and will not affect your job application in any way. Completion of this section of the application form is voluntary, but the information will help us to ensure equality of opportunity.

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| **Section 1 – Gender** | | | |
| Gender: | Male | Female | Prefer not to say |

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| **Section 2 – Disability** | |
| Do you consider yourself to have a disability? | Yes       No       Prefer not to say |
| N.B. Answering “Yes” to this question will not be taken as a formal disclosure. | |

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| **Section 3 – Ethnicity** | | | | | |
| Ethnic Origin Code (*e.g.* 1-A = White British) | |  | | | |
| *Ethnic Origin Codes to choose from:* | | | | | |
| 1. WHITE   1-A - White British  1-B - White Irish  1-C - White Other | 1. MIXED   2-D - White and Black  Caribbean  2-E - White and Black African  2-F - White and Asian  2-G - Any other mixed  background | | 1. ASIAN OR ASIAN BRITISH   3-H - Indian  3-I - Pakistani  3-J – Bangladeshi  3-K – Any other Asian  background | 4. BLACK OR BLACK BRITISH  4-L - Caribbean  4-M- African  4-N- Any other Black  background | 5. OTHER  5-O – Chinese  5-P – Other  5-Q – Not  stated |

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| **Section 4 - Religious Belief** | | | |
| Religious Belief Code |  | | |
| *Religious Belief Codes to choose from:* | | | |
| A – Christian  B – Buddhist  C – Hindu | | D – Jewish  E – Muslim  F – Sikh | G – Any other religion  H - No religion at all  J - Not stated |

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| **Section 5 – Sexual Orientation** | |
| Sexual Orientation: | Heterosexual       Bisexual       Gay/Lesbian       Prefer not to say |

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| **Section 6 - Marital/Civil Partnership Status** | | | | |
| Marital/Civil Partnership Status | |  | | |
| *Marital/Civil Partnership Status’ to choose from:* | | | | |
| A - Married  B - Civil Partnership | C - Single  D - Divorced | | E - Separated  F - Widowed | G - Other (e.g. Living with partner)  H - Prefer not to say |
| *(Note A civil partnership is defined here as a legally recognised relationship for same sex couples, similar to marriage)* | | | | |

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| **Section 7 – Age Category** | |
| Age: | 16       17 – 24       25 – 35       36 – 45       46 – 55       56 – 65       66+ |