

**Corporate Staff**

**Application Form**

New Image



**Please return all completed application forms in word document format with the post applying for as the subject line to:**

[recruitment@syfire.gov.uk](mailto:recruitment@syfire.gov.uk)

*or*

post completed paper applications to:

**Confidential Application Form**

Recruitment

South Yorkshire Fire & Rescue

197 Eyre Street

Sheffield

S1 3FG

**IMPORTANT INFORMATION**

* Appointments to South Yorkshire Fire & Rescue are subject to successful pre employment screening i.e. reference checks, criminal bureau checks, medical screening and substance misuse testing.
* If you have not been contacted within three weeks of the closing date please assume that your application has been unsuccessful.
* Underpaid items will not be accepted by our post room, therefore please check the current rate of postage.
* CV’s will not be accepted.
* The information collected via this form is for the purpose of assessing your eligibility and suitability for the role. This form, and the information contained therein, will be stored securely and appropriately disposed of as per the requirements of the Data Protection Act 2018 (GDPR). This application form will be retained for a period of 6 months from the closing date.
* Depending on the number of applications received for the post, the Organisation may wish to expand on the selection process by introducing a form of assessment. The assessment will be related to the criteria of the post, and applicants will receive sufficient notice of the assessment taking place.

**COMPLETING THE APPLICATION FORM**

* Please ensure you read all the information provided to help you decide whether or not the post is suitable for you.
* If, after reading through the recruitment material you have any remaining questions, please feel free to contact a member of the Recruitment team on 0114 253 2811.
* Complete the form electronically or as neatly as possible using black ink. Applications will be discarded if not in black ink.
* The decision to invite you to the next stage will be based on the information you provide on this form.
* Please read through your completed application form carefully to ensure you have not missed anything out and that it is clearly and accurately presented. Failure to provide accurate and complete information may result in your application being rejected.
* Please use additional sheets if required. Any additional sheets used should be clearly marked with the post you are applying for and the section of the application form the information relates to.
* If you are successful after the recruitment stage and a signed copy of the application form has not been submitted, a signature will be requested during the appointment process.

**PLEASE COMPLETE ALL SECTIONS OF THE APPLICATION FORM**

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| **Application details** | |
| Post applying for |  |
| How did you find out about the vacancy? (e.g. Totaljobs.com, Job Centre Plus) |  |

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| **Personal details** | | | | | | |
| Title | Mr Ms Mrs Miss Other, please specify: | | | | | |
| First name(s) |  | | Middle name(s) | |  | |
| Surname |  | | | | | |
| First line of address |  | | | | | |
| Town/ City |  | | | | | |
| County |  | | | Post Code | |  |
| Email address |  | | | | | |
| Preferred contact type | Home Mobile Work Other | Preferred contact number | | | |  |
| Additional contact type | Home Mobile Work Other | 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? | | | | Yes No |

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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 the 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? | Yes No |
| If yes please give details |  |
| Do you have any pending cases? | 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? | 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.* |  |

*If submitting your application electronically, please leave the below declaration blank as if your application is successful at sift stage you will be asked to sign the declaration at interview.*

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| **Declaration** | | | |
| I declare that all the information given by me on this application 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** |  |

***Please note –*** *This page is detached from your application form and held within HR, it is not made available to*

*anyone involved in the selection process*

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| **Present Employer (or last employer if not in employment)** | | | |
| Employer |  | | |
| My job title |  | | |
| First line of address |  | | |
| Town |  | | |
| City |  | | |
| Post Code |  | | |
| Telephone number |  | | |
| Employed from |  | Employed to |  |
| Main tasks/responsibilities |  | | |
| Reason for wanting to leave or having left |  | | |
| Salary was / is |  | | |
| Notice period required |  | | |

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| **Employment history – Details of other employment in date order** | | | |
| Employer |  | | |
| Employed from |  | Employed to |  |
| My job title |  | | |
| Salary |  | | |
| Main tasks/responsibilities |  | | |
| Reason for leaving |  | | |
|  |  | | |
| Employer |  | | |
| Employed from |  | Employed to |  |
| My job title |  | | |
| Salary |  | | |
| Main tasks/responsibilities |  | | |
| Reason for leaving |  | | |

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| --- | --- | --- | --- |
| Employer |  | | |
| Employed from |  | Employed to |  |
| My job title |  | | |
| Salary |  | | |
| Main tasks/responsibilities |  | | |
| Reason for leaving |  | | |

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| Have you ever been dismissed? | Yes No |
| If yes, please give details |  |
| Have you worked for a Fire and Rescue Organisation previously? – If yes please give details |  |
| Do you have any gaps of employment of 6 months or longer within the last 5 years? | Yes No |
| If yes, please provide details: |  |

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| **Education – Examination taken (O Levels, GCSE’s, CSE, Degree higher or equivalent)** | | |
| **Subject** | **Exam Level** | **Result Grade** |
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| **Education continued – Other examinations including professional relevant to the application** | | | |
| **Subject** | **Exam Level** | **Date of Exam** | **Result Grade** |
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| **Training – Training courses relevant to the application** | | |
| **Course** | **Date** | **Duration** |
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| **Membership of Professional / Technical Organisations** | | |
| **Membership** | **Date from** | **Date to** |
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| **Please provide specific examples of how your knowledge, experience, personal effectiveness meet each of the requirements detailed in the person specification for the post you are applying for.**   * You need to provide examples to show how you meet the essential and desirable criteria for the role. * This is the most important part of your application and is your opportunity to sell yourself. * Use only the relevant parts of your career history or personal experience and try to write your examples in a concise, well-organised and positive way. * *Continue on additional sheets if necessary – if posting please include additional sheets after this page* |
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| **Supplementary Information** | |
| Are you related to any employee of SYFR or the Fire Authority? | Yes No |
| If yes, please provide details |  |
| Do you hold a full UK driving licence? | Yes No |
| If yes, what category is it? |  |
| Is there any reason you are aware of why you should not be employed by South Yorkshire Fire & Rescue? |  |
| If yes, please give details |  |

Please ensure you complete the Reference Information and Equality & Diversity Monitoring Form below prior to submitting the application form.

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| **REFERENCE INFORMATION**  Please supply below the name of your referees. These need to be your current or most recent employer and previous employer. If you have not had a previous employer then your school / university tutor will suffice.  Please remember that your employment is subject to receiving satisfactory references. |

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| **Reference 1 – Current or most recent employer** | | | |
| Your Job title |  | | |
| Employed from |  | Employed to |  |
| Organisation name |  | | |
| Referees name |  | | |
| First line of address |  | | |
| Town/City |  | | |
| Post Code |  | | |
| Telephone number |  | | |
| Email address |  | | |
| Reference Type | Employer Academic | | |
| Can this reference be sought prior to interview? | Yes No | | |

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| **Reference 2 – Previous Employer** | | | |
| Your Job title |  | | |
| Employed from |  | Employed to |  |
| Organisation name |  | | |
| Referees name |  | | |
| First line of address |  | | |
| Town/City |  | | |
| Post Code |  | | |
| Telephone number |  | | |
| Email address |  | | |
| Reference Type | Employer Academic | | |
| Can this reference be sought prior to interview? | Yes No | | |

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**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** | | | | |
| Male | Female | Non-Binary | Prefer not to say | Other – Please specify…………………………… |

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| **Section 2 – Disability** | |
| Do you consider yourself to have a disability? | Yes – please specify below:  No  Prefer not to say |
| **Definition of disability under the Equality Act 2010** “if you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities. **What ‘substantial’ and ‘long-term’ mean** - ‘substantial’ is more than minor or trivial, e.g. it takes much longer than it usually would to complete a daily task. ‘Long-term’ means 12 months or more  SYFR will use this information to support individuals throughout their employment, ensuring reasonable adjustments are in place to assist employees to undertake their role | |
| Disability: |  |

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| **Section 3 – Race** | | | | | | | |
| Nationality | |  | | Country of Birth | |  | |
| Race Category *(see options below)* | |  | | | | | |
| **WHITE**  English, Welsh, Scottish, Northern Irish or British  Irish  Gypsy or Irish Traveller  Roma  Any other White background | **MIXED OR MULTIPLE ETHNIC GROUPS**  White and Black Caribbean  White and Black African  White and Asian  Any other Mixed or Multiple ethnic background | | **ASIAN OR ASIAN BRITISH**  Indian  Pakistani  Bangladeshi  Chinese  Any other Asian background | | **BLACK, AFRICAN, CARIBBEAN OR BLACK BRITISH**  African  Caribbean  Any other Black, African or Caribbean background | | **OTHER ETHNIC GROUP**  Arab  Any other ethnic group |

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| **Section 4 – Religion or Belief** | | | | |
| Religious Belief Category |  | | |
| *Religious Belief Categories to choose from:* | | | |
| Buddhist  Christian  Hindu | | Jewish  Muslim  Sikh | Prefer not to say  None  Other – Please Specify |

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| **Section 5 – Marital/Civil Partnership Status -** Which of the following describes your relationship status | |
| Marital Status | Married/Civil Partnership  Single  Divorced  Separated  Widowed  Prefer not to say  Other - please specify ……………………………… |

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| **Section 6 – Sexual Orientation** | |
| Sexual Orientation | Which of the below best describes your sexual orientation? |
| *Sexual Orientation Status’ to choose from:* | |
| Bisexual  Gay  Heterosexual  Lesbian  Prefer not to say  Other Sexual Orientation – please specify …………………………………………….. | |

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| **Section 7 – Age Category** | | | | | | | | |
| Age: | 16 | 17 - 20 | 21 - 24 | 25 - 35 | 36 - 45 | 46 - 55 | 56 - 65 | 66+ |