

# GUERNSEY CIVIL SERVICE

## APPLICATION FORM

*You must complete this form rather than enclosing a copy of your C.V. Additional information may be attached if you wish. This form will be acknowledged*

### Data Protection Statement

The data collected on this application form will be held in accordance with the Data Protection (Guernsey) Law 2001 and will be used by the States of Guernsey only for purposes of recruitment/selection and employee administration. It will not be disclosed to any third party unless required by statute or by obtaining your express consent.

<p>Application for appointment as:</p> <p>Department:</p>
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### PERSONAL DETAILS

Surname: and Title:		Forename(s):			
Home Address:					
Home Telephone number:		Work Telephone number:		Interview: Date: Time: Venue:	
Mobile Number:		e-mail address:		Applicant advised	
Do you have a valid Right to Work document? If you are select for interview, you will be required to produce the original of any Right to Work document				YES / NO	
Type and reference number of Right to Work document:					
Expiry date (if any) of Right to Work document:					
				References obtained	
				Vacancy number	
				Application number	

<b>Secondary Education</b>			
Schools Attended	Dates Attended		Qualification(s), grade(s) obtained and dates <i>(please indicate examinations to be taken/grades awaited)</i>
	From	To	

<b>Further Education</b>			
Colleges/Universities Attended	Dates Attended		Qualification(s), grade(s) obtained and dates <i>(please indicate examinations to be taken/grades awaited)</i>
	From	To	

<b>Training &amp; Development</b>	(Please include in-house training courses, technical, professional and specialist training together with qualifications obtained)	
Course Attended and Dates	Course Attended and Dates	

Should you be successful you may be asked to provide evidence of any relevant qualifications gained.

**PRESENT EMPLOYMENT**

<u>Position Held</u>		<u>Employer or States Department (if Civil Servant)</u>		<u>Date of Appointment</u>
<u>Current Salary</u>	<u>Grade (if Civil Servant)</u>	<u>Additional Allowances</u>	<u>Is Position Pensionable?</u>	<u>Period of Notice Required</u>
			YES / NO	

**INTERNAL STAFF ONLY**

Are you a member of the Established Staff? (please see your appointment letter for confirmation)	YES / NO	Is your Housing Licence attached to your current post?	YES / NO
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**PREVIOUS EMPLOYMENT**

<u>Position Held</u>	<u>Employer or States Department (if Civil Servant)</u>	<u>Dates</u>	
		From	To

***PLEASE ATTACH ADDITIONAL INFORMATION THAT DEMONSTRATES HOW YOU MEET THE KEY CRITERIA FOR THE POST, AS STATED ON THE JOB DESCRIPTION.***

***(YOU MAY WISH TO INCLUDE DETAILS OF EXPERIENCE/SKILLS GAINED THROUGH HOBBIES/ INTERESTS AND LEISURE ACTIVITIES)***

## HEALTH RECORD

Are you in good health? YES / NO

Have you had any serious illness requiring medical consultation or admission to hospital in the last two years? YES / NO

Have you any health problems which might interfere with work? YES / NO

How many days have you been absent from work through sickness in the last two years? days

How many spells of sickness absence have you had in the past two years? spells

## REFERENCES

1) EXTERNAL APPLICANTS: You may approach my present employer at this stage?  
YES / NO

2) INTERNAL APPLICANTS: Internal references will be taken up from your existing line manager as a matter of course. (Please complete Section 1 only)

1. NORMALLY THIS SHOULD BE YOUR PRESENT EMPLOYER  
(For existing Civil Servants, please give name and contact details of your line manager)

Name:

Position:

Address:

Telephone Number:

Fax Number:

e-mail address:

2.

Name:

Position:

Address:

Telephone Number:

Fax Number:

e-mail address:

*References will be retained by the Policy Council HR Unit for a period of twelve months for the purposes of this application only.*

I DECLARE that the information contained in this form is true and complete to the best of my knowledge and belief. I understand that should I make a false statement regarding my history by completing this form incorrectly I will, if appointed, be liable to termination of my contract with or without notice.

Signature of Applicant:

Date:



Please return to: Head of Human Resources  
Policy Council,  
Sir Charles Frossard House,  
La Charroterie,  
St Peter Port,  
Guernsey,  
GY1 1FH

## EQUAL OPPORTUNITIES MONITORING

The States of Guernsey is committed to equal opportunities and seeks to ensure that there is no discrimination on the grounds of race, ethnic origin, gender, age or disability. Though the information you give plays no part in the selection process and is only used for statistical analysis, we would stress that the information is vital to ensure that our policy is carried out. The information supplied on this form will be treated in the strictest confidence and will be separated from the application from on receipt.

Thank you for your cooperation.

Are you already a member of the Established Staff?                      YES                       NO

How did you find out about this post?

Title of post for which you are applying

Department where post is based

Your current salary or grade

Closing date of vacancy

### GENDER

MALE

FEMALE

### AGE

16-19

25-30

41-50

20-24

31-40

51-60+

### ETHNIC ORIGIN

NB. Ethnic Group is not the same as "nation of origin" or "race", but is normally defined in relation to a people or culture with which a person, or their forebears, most strongly identify

Please state your Ethnic Group (e.g. White, Black, Asian etc.)

### NATIONALITY

Please specify

### COUNTRY OF BIRTH

Please specify

It is part of our policy that disabled people who apply for employment should not be disadvantaged or receive less favourable treatment.

Do you consider that you have any impairment or disability?                      YES                       NO

I would describe the nature of my impairment/disability as:-

## **Guidance Notes for Applicants**

### **Completing the Application Form**

- Before completing this form please ensure that you have read and understood the job description and key criteria for the post.
- **It is essential that in addition to completing this form, you submit supporting evidence to explain how your skills, abilities, experience and qualifications compare with the key criteria for the post.**
- **Wherever possible, provide supporting evidence and examples to demonstrate how you meet each of the key criteria. Without this factual information, it will be more difficult for the panel to short-list you.**
- Please complete all sections of the form instead of sending a CV as a substitute.
- Please remember to sign the declaration at the end of the form to certify that all the information given is correct.

### **Procedure Following Application**

- We will acknowledge receipt of your application.
- Short-listing will take place as soon as possible after the closing date. Short-listing decisions will be based on the information provided on the application form in relation to the key criteria.
- If you have been shortlisted we will confirm this in writing together with arrangements for the interview.
- Applicants who are not shortlisted will be advised in writing
- References for shortlisted applicants are normally sought prior to interview unless indicated to the contrary on the application form. All appointments are conditional upon receipt of satisfactory references.
- Applicants will be advised of the outcome of their application as soon as practicable after the interview.

### **For Applicants with Special Needs**

- If there are any reasonable adjustments that you require in terms of arrangements for the interview, please discuss these with the contact named in the advertisement for the post or contact the Human Resources Unit at the Policy Council.
- Please note that the Human Resources Unit administers a fund to support the employment of people with special needs to assist Departments in making reasonable adjustments in the workplace. If you have special needs in terms of your working environment please discuss with the contact named in the advertisement or contact the Human Resources Unit at the Policy Council.

### **Care Workers**

- For staff working with children and vulnerable adults, employment data will be held on the Register of Care Workers (Guernsey).

If you would like to seek clarification on any point please contact the Human Resources Unit, Policy Council on tel:(01481) 717001, fax (01481)713884, e-mail :hr@gov.gg.