

# WESSEX RESERVE FORCES' AND CADETS' ASSOCIATION PERSONAL INFORMATION (CONFIDENTIAL)

Post title: **Facilities Manager** I. Personal Details Name: Title: Address: Post Code: If successful, when are you available to start work? Contact Details: (Please tick preferred contact detail) Email address: Telephone: ☐ Home: ☐ Business: ☐ Mobile: Please state where you saw this vacancy advertised: 2. General Do you hold a current driving licence? 

Yes □ No If Yes, which licence is it? ☐ Full ☐ Provisional ☐ LGV ☐ PCV Are there any adjustments that may be required to be made should you be invited for interview, for example disabled access? If so, please state here:

| 3. References   |   |
|---|---|
| Please indicate two people who can<br>employer:                             | n provide references – one of whom must be your present/most re |
| Name:   | Name:   |
| Address:  | Address:  |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| Tel. No.  | Tel. No.  |
| Email:  | Email:  |
| Occupation:   | Occupation:   |
|   |   |
| I give/do not give permission to take<br>my references prior to an offer of | e up  |
| employment being made.  |   |
|   |   |
| (delete clearly as appropriate)   |   |
|   |   |

#### 4. Data Protection Statement

The information that you provide on this form and that obtained from other relevant sources will be used to process your application for employment. The personal information that you give us will also be used in a confidential manner to help us monitor our recruitment process.

If you succeed in your application and take up employment with us, the information will be used in the administration of your employment with us and to provide you with information about us. We may also use this information if there is a complaint or legal challenge relevant to this recruitment process.

We may check the information collected, with third parties or with other information held by us. We may also use or pass to certain third parties information to prevent or detect crime, to protect public funds, or in other ways as permitted by law.

By signing the application form we will be assuming that you agree to the processing of sensitive personal data, (as described above), in accordance with our registration with the Data Protection Commissioner.

#### 5. Declaration

I declare that the information I have given in this application is accurate and true. I understand that providing misleading or false information will disqualify me from appointment OR, if appointed, may result in my dismissal.

| Signature: | Date: |
|------------|-------|

## Please complete in full and return with CV to:

Administrative Officer Secretariat

Wessex Reserve Forces and Cadets Association

Mount House, Mount Street, TAUNTON TAI 3QE

E: wx-secretariat@rfca.mod.uk

### **Equal Opportunities Monitoring**

This section of the application form will be detached from your application and will be used solely for monitoring purposes.

The Reserve Forces' and Cadets' Association recognises and actively promotes the benefits of a diverse workforce and is committed to treating all employees with dignity and respect regardless of race, gender, disability, age, sexual orientation, religion or belief. We therefore welcome applications from all sections of the community.

| White:       | ☐ British        | □ Irish          | ☐ Any other white background*   |
|--------------|------------------|------------------|---|
| Mixed:       | ☐ White ar       | ıd Black Africai | an □ White and Asian □ Any other mixed background*  |
| Black or B   | Black British:   | □ Caribbe        | ean   African   Any other black background*   |
| Asian or A   | Asian British:   | ☐ Indian         | ☐ Pakistani ☐ Any other Asian background*   |
| Chinese o    | r Other Ethnic   | Group: □         | Chinese   |
| Please spe   | cify             |                  |   |
| Gender:      | Please specify   |                  |   |
| Do you co    | onsider yourself | to have a disa   | ability: 🗆 Yes 🗆 No   |
| If Yes, plea | ase state nature | of disability:   |   |
|              |                  |                  |   |
|              |                  |                  | s disability as "A physical or mental impairment which has a substantial lity to carry out normal day-to-day activities". |
| you wish,    | you may disclo   | se information   | n about yourself in this section about your:  |
| eligion      |                  |                  |   |
| Sexual Or    | ientation        |                  |   |