

Application Form

Please complete this application form and return it to:

[**post@agaa.cymru**](mailto:post@agaa.cymru)

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Data protection

We take our obligations under data protection legislation seriously: these require us to explain how the data you have provided on this form and how any other personal data which may be created in connection with your application may be used. Any data about you will be held in secure conditions, with access restricted to those who need it in connection with dealing with your application and selection (i.e. those involved in the selection, recruitment and employment functions).

Data may also be used for the purposes of monitoring the effectiveness of the selection process, but in these circumstances, all data will be anonymised. Personal data relating to your application will be kept in secure conditions for up to three years if you are unsuccessful. If you are appointed to a role, the data will be transferred to your employment record. We will be unable to process your application unless we can use your personal data in the ways described above.

We are an equal opportunities employer

We particularly welcome and encourage applications from under-represented groups, including women, people from minority ethnic groups and disabled people.

The Leadership Academy has a policy of equality of opportunity.  Everyone who is eligible to join the Leadership Academy will receive equal treatment when applying for jobs, and if successful will have equal access to development and promotion opportunities.

We need the information requested in the Equal Opportunities section of this form to find out if our equal opportunities policies are working and to help us to make further progress. Your information will be treated confidentially, will not be available to recruitment panel members and will not affect your application in any way.

The Leadership Academy operates under the Positive about Disabled People Scheme and welcome applications from people with disabilities. This scheme guarantees an interview to disabled people if they meet the essential requirements for the position.

**Declaration**

**NOTE**  
We must interpret strictly and impartially the conditions regarding nationality and qualifications, but we cannot investigate fully the eligibility of every candidate prior to the selection process. If you are successful a complete enquiry into your eligibility will be made. If it is determined that you are not eligible for the position for which you have applied, your offer of employment could be withdrawn. If you are uncertain about any aspect of your eligibility please contact us.

I have a disability and would like to be given a guaranteed interview under your commitment to

the Positive about Disabled People Scheme. Yes  No

Do you have any specific needs or require specific equipment if invited to attend an interview?

Yes  No

**In confidence:** If ‘Yes’, please provide further details below

**Section 1: Personal Information**

|  |
| --- |
| Please write in black ink and use CAPITAL LETTERS |

Are you a legal resident in the United Kingdom? Yes  No

Are you under immigration control? Yes  No

If **‘**Yes’, please give us details.

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|  |

Are there any restrictions on you continuing to live in the UK? Yes  No

If ‘Yes’, please give us details

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##### Personal details

|  |  |
| --- | --- |
| Title: |  |
| Surname |  |
| Forename |  |
| Address |  |
| Address Line 2 |  |
| Address Line 3 |  |
| Town/City |  |
| Country |  |
| Postcode |  |
| Daytime telephone number (including area code): |  |
| Evening telephone number: |  |
| Email address |  |
| How did you find out about this vacancy? |  |

##### References

Please provide the details of two professional references. Please note that we will not contact your referees unless your application is successful.

|  |  |
| --- | --- |
| **Name** |  |
| **Organisation** |  |
| **Address** |  |
|  |
| **Email Address** |  |
| **Phone Number** |  |

|  |  |
| --- | --- |
| **Name** |  |
| **Organisation** |  |
| **Address** |  |
|  |
| **Email Address** |  |
| **Phone Number** |  |

**Section 2: Employment/Education History**

Please list employers / education providers for the last 3 years of employment and/or education. You must account for any gaps between periods of employment and/or education in the space provided.

If employed via a Recruitment Agency, please provide the Agency Contact Details. If you are self employed, please provide details of clients you have worked with.

If employed by more than one employer at any given time, or if employed while in education, please provide full details in date order, most recent first, including gaps.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Dates  (Most recent first) | | Name & Address of Employer / Education provider | Name of Line Manager / Tutor (including telephone number and email) | Job Title / Course title | Please account for any gaps in employment / education e.g. unemployment, travelling etc. |
| From | To |
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**Are you in a close relationship with, or are you closely related to a current member of the Board of the Leadership Academy?**

This will not prevent you from being considered for this post

Yes  No

If yes, please provide their name and type of relation/relationship (e.g. father, mother, husband, wife, partner).

|  |
| --- |
|  |

**Qualifications**

Please give details of all relevant qualifications. You may be asked to provide documentary evidence to confirm your answers

|  |  |  |
| --- | --- | --- |
| Subject | Grade | Year |
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## Section 3: Key Tasks & Skills Evidence

**Please provide evidence against each of the key tasks and competencies listed in the job description and include it with your application. The evidence should not exceed 1500 words. Additional words will be discounted. You MUST provide evidence against each criterion or you may not be successful at the sifting stage. This is the most important part of your application.**

|  |
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**If you have a digital portfolio of your work, please send it with your completed application form to** [**post@agaa.cymru**](mailto:post@agaa.cymru)

**Section 4: Languages**

**Please tell us about your level of ability in Welsh. Please tick as many as apply.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Spoken:**  Fluent  In Most Situations  With Some Hesitancy  Answer Simple Queries  Basic Conversation  None  **Understanding:**  Full Understanding  Most Conversations  Routine Conversation  Social Conversation  Basic Enquiries  None | **Reading:**  Full Understanding  Most Material  Routine Material  Simple Material  Basic words/phrase  None  **Written:**  Proficient  Prepare written work  Draft Routine Text  Answer simple queries  Write basic messages  None |  | **Written:**  Proficient  Prepare Written Work  Draft Routine Text  Answer Simple Queries  Write Basic Messages  None |

What is your preferred language for assessment?

**English  Welsh**

We will try to make sure that your assessment is in your preferred language. If you have chosen Welsh as your preferred language, we must test your ability of English so the assessment will be in both languages. If you have chosen English, we will only test your ability to speak Welsh if you are applying for a post where an ability to speak Welsh is required*.*

**Declaration**

The information I have given in this application is true and accurate to the best of my knowledge.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section 5: Equality Opportunities Monitoring Form**

The Leadership Academy is committed to recruiting, retaining and developing a workforce that reflects the diverse communities that we serve. It is vital that we monitor and analyse diversity information so that we can ensure that our employment practices are fair and transparent, and promote equality of opportunity. Your cooperation in providing us with accurate data will help us to meet our legal obligations set out under the Equality Act 2010. Any information provided on this form will be treated as strictly confidential and will not be used in any way which allows any individual to be identified.

**Job Title:**

**Sex:**  Male  Female  Prefer not to say

Is your gender identity the same as the gender you were born with?

Yes  No  Prefer not to say

**Are you married or in a civil partnership?**  Yes  No  Prefer not to say

**Are you currently pregnant or have been pregnant within the last year?**

Yes  No  Prefer not to say

**Have you taken maternity leave within the last year?**

Yes  No  Prefer not to say

**Age**

16 – 24  25-29  30 - 34  35 - 39  40 – 44  45-49

50 - 54  55 – 59  60 – 64  65 +  Prefer not to say

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How would you describe your national identify?**

British or Mixed British  English  Northern Irish

Scottish  Welsh  Other National Identity

Prefer not to say

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What is your ethnicity?**

Please indicate your ethnic origin by ticking the appropriate box

***White***

Welsh/English/Scottish/Northern Irish/British

Irish

Gypsy or Irish Traveller

*Other white background*

**Mixed/Multiple ethnic groups**

White and Black Caribbean

White and Black African

White and Asian

Any other mixed background

**Asian/Asian British**

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian Background

**Black/African/Caribbean**

Black – African

Black – Caribbean

Any other Black background

**Other ethnic group**

Arab

Any other ethnic group

***Prefer not to say***

**Do you consider yourself to be disabled as defined by the Equality Act 2010?**

Yes  No  Prefer not to say

The Equality Act 2010 defines disability as:

*“A physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day-to-day activities”*

Social Model of Disability

In 2002, Welsh Government and its sponsored bodies adopted the Social Model of Disability as the foundation for its work on disability. The model advocates the people with impairments are disabled by physical, attitudinal and organisation barriers created by society. The Model is a positive approach to disability and focuses on removing barriers to equality of opportunity.

**What is your sexual orientation?**

Heterosexual/straight

Gay woman/lesbian

Gay man

Bisexual

Other

Prefer not to say

**What is your religion or belief?**

Agnostic  Atheist  Baha’i

Buddhist  Christian  Hindu

Humanism  Jainism  Jewish

Muslim  Paganism  Rastafarian

Shinto  Sikh  Tao

Zoroastrian  Any other religion  No Religion

Prefer not to say

**Thank you for completing this form.**

**We separate section 5 from your application form and destroy it after recording information for monitoring requirements.**

**Please return the application to:**

[post@agaa.cymru](mailto:post@agaa.cymru)