



Please return this form to:
 chumphrey@bucksfire.gov.uk

HR Department
 Brigade Headquarters
 Stocklake
 Aylesbury
 Bucks
 HP20 1BD

APPLICATION FORM

Please complete this form in **BLACK INK** or **TYPESCRIPT**

Please do not attach a Curriculum Vitae

Position applied for	
Closing date	

Personal Details		
Surname	Forenames	Title
Address		
Postcode		
Email address		
Telephone numbers		
Home		
Mobile		
Work	can we contact you at work: Yes <input type="checkbox"/>	
	No <input type="checkbox"/>	

EMPLOYMENT HISTORY

Present Position <i>(Please give details of your current position)</i>				
Employer name and address				
Post title	Date appointed	Current salary	Amount of sickness in last 12 months	Notice period required
Main duties and responsibilities <i>(Please summarise)</i>				
Reason for leaving				

Past employment				
Dates from/to	Employer	Position	Salary	Reason for leaving

EDUCATION / QUALIFICATIONS

Qualifications and Education <i>(Please give details of all nationally recognised qualifications including Secondary Education)</i>						
Qualifications gained	Subject (s) studied	Grade / Level achieved	Place of education	Full / part time	Period of study years	
					From	To

Training Courses <i>(Please give details of training you have undertaken to which you wish to draw particular attention)</i>			
Training course title	College or organisation	No. of days	Month/year completed

Professional associations	Status of membership & membership number	Date of joining

Referees (Please give details of two referees covering your employment history. One of these must include your line manager from your most recent employer)

Name Position (please state their role e.g. Line Manager) Company address and post code Telephone number Email contact	For official use only	
	Requested	Received

Name Position (please state their role e.g. Line Manager) Company address and post code Telephone number Email contact	For official use only	
	Requested	Received

Please note. All referees will be contacted after interview.

The Working Time Directive requires employees not to work more than 48 hours per week and have sufficient rest periods. Please list here any other work you undertake.

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Additional information

Please give your reasons for making the application. Your knowledge, skills or abilities may have been gained in a variety of ways, e.g. work experience, spare time activities, domestic circumstances etc. Please continue on a separate sheet if necessary.



It is in your own interest to indicate any relationship to Managers or Councillors within Buckinghamshire Fire & Rescue Service. Please give name, position and relationship.

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Equal Opportunity Policy

Buckinghamshire Fire & Rescue Service aims to ensure all job applicants are given equal consideration irrespective of ethnic origin, nationality, sex, marital status, age, religion, sexual orientation or disability. The information requested in this section of the application form will be detached prior to short listing and will not be considered during the short listing process. It will be kept separate and used to monitor the effectiveness of the Equal Opportunity Policy.

Applicants with disabilities should not be deterred from applying since there are schemes available to help adapt working conditions to overcome specific aspects of disability. If you have a disability please enclose a separate letter outlining the nature of your disability and indicate any assistance required at interview and any reasonable adjustments which you feel would be helpful to allow you to perform the post successfully.

Buckinghamshire Fire & Rescue Service aims to promote equality of opportunity for all with the right qualities, skills and attributes and welcomes applications from diverse candidates.

Rehabilitation of Offenders Act

A CRB check is undertaken for all staff who are deemed to occupy jobs that bring them into contact with children, young people and vulnerable adults. Any offer of appointment will be subject to CRB clearance.

Criminal records will be taken into account for recruitment purposes only when the conviction is relevant. Having a criminal record will not necessarily bar you from employment but this will depend on the circumstances and background of your offence(s). Disclosure information will not be used unfairly.

It is a condition of employment that all pending court cases, convictions (spent or unspent) and cautions are disclosed. Applicants with any convictions, cautions or pending court cases should provide details below including the date, continuing on a separate sheet if necessary, those who have no convictions or pending court cases should state here **“I have no convictions/cautions or pending court cases.”** Any information given will be considered only in relation to an application for positions to which the order applies. Failure to disclose such information could result in subsequent dismissal or disciplinary action by Buckinghamshire Fire & Rescue Service

Convictions/cautions or pending court cases
Details, where applicable:

Work Permit (Asylum and Immigration Act 1996)

The Authority is required by law to ensure that any persons it employs has the right or permission to reside or work in the United Kingdom. Any person to be offered employment will be required to produce relevant original documentation when requested.

Date of birth		National Insurance No.	
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Gender <i>Please tick box</i>	Male <input type="checkbox"/>	Female <input type="checkbox"/>
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Ethnic Origin <i>Please select the category that you feel best describes your ethnic background</i>						
White	Asian or Asian British	Chinese or other Ethnic Group	Mixed	Black or Black British		
British	Indian	Chinese	White & Black Caribbean	Caribbean		
Irish	Pakistani	Other	White & Black African	African		
Other White	Bangladeshi	Don't Know	White & Asian	Other Black		
			Other			

Do you consider yourself to have a disability which you would like to draw to our attention?	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
If yes, do you consider your disability could affect your ability to perform this role?	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
If yes, are there any reasonable adjustments which could assist you to do this role?	

<p>Data Protection Act</p> <p>The information you have provided as part of this application will be used for the purpose of recruitment and selection and will form the basis of your personnel record on appointment. Information will be used for statistical personnel reporting. The data will be stored securely and will only be used for the purpose originally intended.</p>

I certify that the information given on this form is correct. I understand that any wilful omission or falsification may lead to the disqualification of the application or dismissal if appointed to the post applied for.	
I confirm that I have read and understood the above statement <input type="checkbox"/>	
Signed <i>(please print name if submitting electronically)</i>	Date

BUCKINGHAMSHIRE FIRE & RESCUE SERVICE

Equal Opportunities Monitoring Form

The Fire Service serves a diverse community and welcomes applications from all sections of that community. We are totally committed to anti discriminatory practices and base the recruitment, retention, training and promotion of our employees only on those justifiable criteria required for the post.

All applicants are asked to provide the information on this form, which will be treated in the strictest confidence.

It is important for us to have the information identified, as it will be used to help us monitor our procedures to discover any areas of potential discrimination. **It will not form part of the recruitment process.**

Full Name:

Date of Birth:/...../..... Age:.....

Gender: (please tick box)	Male	<input type="checkbox"/>
	Female	<input type="checkbox"/>

Ethnic Origin									
White	(please tick box)	Asian or Asian British	(please tick box)	Chinese or other Ethnic Group	(please tick box)	Mixed	(please tick box)	Black or Black British	(please tick box)
British	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	White & Black Caribbean	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Irish	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Other	<input type="checkbox"/>	White & Black African	<input type="checkbox"/>	African	<input type="checkbox"/>
Other White	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Don't Know	<input type="checkbox"/>	White & Asian	<input type="checkbox"/>	Other Black	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>

Do you consider yourself to have a disability?	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>

Signed:

Dated:/...../.....