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**CONFIDENTIAL APPLICATION FOR EMPLOYMENT - WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

Position Applied for _____	Reference No. (Office use) _____
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Please complete in **BLOCK** letters and delete where appropriate

**PERSONAL DETAILS**

Surname \_\_\_\_\_ Forename(s) \_\_\_\_\_ Title (Mr, Mrs, Ms, etc) \_\_\_\_\_

Home Address \_\_\_\_\_  
 \_\_\_\_\_

Post Code \_\_\_\_\_ Tel. No. Evening \_\_\_\_\_ Day \_\_\_\_\_

Email Address \_\_\_\_\_ Mobile No. \_\_\_\_\_

National Insurance No. \_\_\_\_\_

Are you a non-EC National? **YES/NO**      If a non-EC National, do you hold a current UK Work Permit  
 or a Right to work Visa? **YES/NO**

Do you have a clean, current driving license? **YES/NO**      Do you have access to a car? **YES/NO**

If no, please give details of last offence/penalty points \_\_\_\_\_

Have you been convicted of any criminal offences which are not yet spent under the provisions of the Rehabilitation of Offenders (NI) Order 1978? (NB: note motor offences and road traffic offences are criminal offences) **YES/NO**

If yes, please give details \_\_\_\_\_

**MEDICAL HISTORY**

A. Please provide brief details and approximate dates of any periods of sickness over the past two years

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

B. *Do you have a medical condition that may affect your performance in the job?* **YES/NO**

If yes, please give details \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you are disabled and have any special requirements to enable you to attend for an interview please specify:

\_\_\_\_\_

During your last year of employment how many days have you been absent due to illness?

Details \_\_\_\_\_

Name and address of family doctor \_\_\_\_\_

\_\_\_\_\_

If necessary, may we contact your doctor for further information? **YES/NO**



# EMPLOYMENT HISTORY

## Present Post.

Name, address and business of employer	From (date)	To (date)	Job title and summary of responsibilities	Reason for leaving/ Notice period
			Present Salary _____	

## Previous Posts.

**Please list all your work history BEGINNING WITH THE MOST RECENT POSITION. If work is part time or voluntary please indicate. A continuation sheet may be attached if necessary.**

Name, address and business of employer	From (date)	To (date)	Job title and summary of responsibilities	Reason for leaving/ Notice period

**If you have not named your current employer (or if unemployed your previous employer) please state why.**

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**Any further information regarding previous posts.**

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# EQUAL OPPORTUNITIES MONITORING QUESTIONNAIRE - PRIVATE & CONFIDENTIAL

**Please ensure that you complete in full the attached monitoring questionnaire.  
Failure to do so may result in your application being rejected.**

APPLICANT REFERENCE NO. \_\_\_\_\_(for office use only)

**In order to ensure that its Equal Opportunities Policy is being implemented effectively the company monitors all employees and applicants.**

**PLEASE ANSWER THE FOLLOWING QUESTIONS BY TICKING THE APPROPRIATE BOX. YOUR APPLICATION WILL NOT BE CONSIDERED IF THIS QUESTIONNAIRE IS NOT COMPLETED AND RETURNED WITH YOUR APPLICATION FORM.**

## PLEASE INDICATE THE COMMUNITY TO WHICH YOU BELONG.

I am a member of the Protestant Community .....

I am a member of the Roman Catholic Community .....

I am a member of neither the Protestant or Roman Catholic Community

### 1. My gender is

MALE  FEMALE

### 2. My martial status is

MARRIED  SINGLE  OTHER

### 3. My family status is

No caring responsibilities  Care for children

Care for other relative  Other

(Please Specify) .....

### 4. Under the Disability Discrimination (NI) Act 1995 a disabled person is defined as a person with “A physical or mental impairment, which has a substantial or long term adverse effect on their ability to carry out normal day to day activities”

**Having read this definition, do you consider yourself to have a disability?**

YES  NO

### 5. How would you describe your race?

BLACK AFRICAN  IRISH TRAVELLER

BANGLADESHI  PAKISTANI

BLACK CARIBBEAN  WHITE

CHINESE  MIXED RACE

INDIAN  OTHER (Please Specify)

### 6. What is your date of birth?

**The information you give will be treated in the strictest confidence and will not be used for any purpose other than monitoring the company’s equal opportunities policy.**

# EQUAL OPPORTUNITIES MONITORING QUESTIONNAIRE

## EXPLANATORY NOTES

This employer is committed to providing equality of opportunity for all job applicants. These notes explain the purpose of the questionnaire, the information to be provided and the way that the information will be used.

1. The questionnaire monitors your religious, gender, marital status, family status, disability, age and race.
2. To ensure the confidentiality of this information the questionnaire has been given an identifying number. Only the monitoring officer will be able to identify this number. **Your name should not be written on this questionnaire.**

You should not allow anyone else to use this questionnaire. If you should accidentally lose or destroy your questionnaire, contact the Monitoring officer, for a copy.

3. The information collected in this questionnaire provides us with very useful information on the profile of individuals applying to the company for jobs. The information will be used to measure the effectiveness of the company's equal opportunities policy and will assist us to develop and review positive/affirmative action policies.
4. The Monitoring information will form no part of the selection process, except when it applies to Disability Discrimination Act 1995, and is confidential except in limited circumstances.
5. Under Fair Employment (NI) Act 1989, the council is required to monitor the community background of its employees and applicants for vacant jobs. We are therefore asking you to indicate the community to which you belong, i.e. The Protestant Community, The Roman Catholic Community or Neither Community.
6. The information on the questionnaire will be stored in a confidential and secure filing cabinet, which can be assessed only by the monitoring officer.

The monitoring system will be concerned only with statistical analysis and will not identify individuals.

**If you have any queries regarding the Monitoring questionnaire, please contact the Monitoring Officer.**