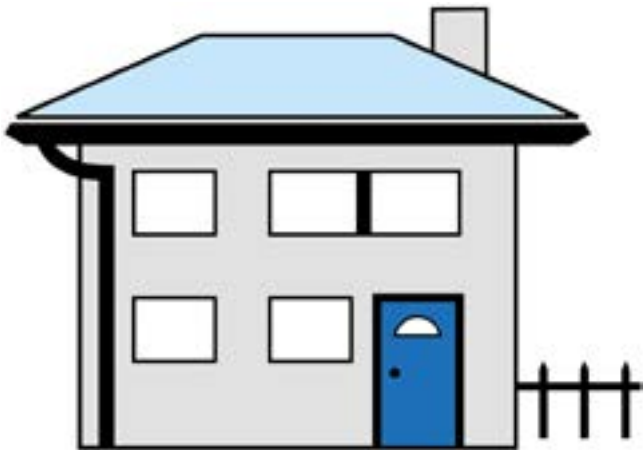




Application form for Learning Disability Network Manager.



Please fill in the blanks.

My Name:

My Address:

.....
.....
.....
Postcode:

My Telephone Number is:

My E-mail Address is:

Job Reference Number : 000000

Job Title : Learning Disability Network Manager

Team : Public Participation



My National Insurance
Number is:

Are you from the UK?

Yes

No

If not, where are you from?

Equality Monitoring Form

What gender are you?

Female

Male

Prefer not to say



When is your birthday?



Day

Month

Year

What is your sexual orientation?



Bisexual (both sexes)

Heterosexual
(other sex)

Lesbian woman

Gay man

Prefer not to say

Do you consider yourself to have any religion?

Buddhism

Christianity

Hinduism

Islam

Jainism

Judaism



Sikhism

No Religion

Atheism

Prefer not to say

Other (Please say):

What is your ethnic background?



Asian, or Asian British

Bangladeshi

Chinese

Indian

Pakistani

Other



Black, or Black British

African

Caribbean

Other



Mixed / multiple ethnic groups

Asian and White

Black African and White

Black Caribbean and White

Other



White, or White British

British

Other

Irish



Other

Other

If any other ethnic background, please state here:

Prefer not to say

The Equality Act 2010 protects disabled people, including people with long term health conditions and learning disabilities.

If you tell us that you have a disability we can make reasonable adjustments to make sure the application process and the interview are fair and equal.

Do you consider yourself to have a disability? Please tick all that apply.



Yes

No

Prefer not to say

Other (please state here):

Do you look after, or give any help or support to a family member, friend or neighbour because of long term physical disability, mental ill-health or problems related to old age?



Yes

No

Prefer not to say



The Rehabilitation of Offenders Act 1974 helps people who have committed crimes in the past to get back into work.

The Act says that people who have committed crimes in the past do not have to tell employers about their convictions after their 'rehabilitation period' has passed.

If you are still in your rehabilitation period, you have to tell your employer about your current convictions, cautions or warnings you have.

Do you have any current convictions, cautions or warnings?

Yes

No

If yes, please give us details of the offense:

| |
|----------------|
| ----- ----- |
|----------------|

Certain crimes are not protected under the Rehabilitation of Offenders Act, and if you've committed these crimes you might not be able to hold this job.

**You will need to have a DBS Check for this post.
Do you agree to this?**

Yes

No



**Thank you for taking the time to fill
in this survey.**

More Info About You



Tell us about your experience working or volunteering in a team and using a rights-based approach.

A large rectangular area with a thin black border, containing ten horizontal dashed lines for writing.

More Info About You



Tell us about your experience giving presentations or training professionals about working with people with Learning Disabilities.

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Job Reference Number : 000000
Job Title : Learning Disability Network Manager
Team : Public Participation

More Info About You

Tell us why you are passionate about making things better in the lives and health of people with Learning Disabilities.

A large rectangular box with a thin grey border, containing ten horizontal dashed lines for writing.

Job Reference Number : 000000
Job Title : Learning Disability Network Manager
Team : Public Participation

More Info About You

Is there anything else you want to tell us about yourself? This could be about your interests or hobbies or just more about you.

A large rectangular box with a thin grey border, containing ten horizontal dashed lines for writing.

Job Reference Number : 000000

Job Title : Learning Disability Network Manager

Team : Public Participation

Please tell us about any work, volunteering or learning you have done over the last three years

Where have you worked?

What did you do there?

When did you work there?

Was it paid?





Yes

No





Yes

No





Yes

No

Job Reference Number : 000000

Job Title : Learning Disability Network Manager

Team : Public Participation

How did you find out about the job?

Internet

NHS Jobs

Job Centre

Other:

Job Reference Number : 000000
Job Title : Learning Disability Network Manager
Team : Public Participation

Declaration

I agree that the information
I have given is true.

By signing below, I agree
that if I have given any
information that is not true
I may not be able to get or
keep the job.

My Signature is:

My Name is:

The Date is: