|  |  |
| --- | --- |
| **Post Applied For:** |  |

**Please complete this form electronically or in black ink.**

**Personal Details**

|  |  |
| --- | --- |
| **Surname:** |  |
| **First Names:** |  |
| **Title:** Mr / Mrs / Miss / Ms / other (please specify) |  |
| **Have you ever been known by any other name?** Yes / No |  |
| **If Yes, please give details:** |  |
| **Home Address:** |  |
| **Postcode:** |  |
| **Daytime Tel No.:** |  |
| **Mobile Tel No.:** |  |
| **Preferred Contact No.:** (Daytime or mobile) |  |
| **Email Address:** |  |
| **Do you have the right to work in the UK?** Yes/No |  |
| **Right to work basis** e.g. British or Irish Citizen, EU/EEA settled or pre-settled status, other – please specify |  |

|  |  |
| --- | --- |
| **Where did you see this post advertised?** |  |

**Disability Confident Scheme**

This guarantees to interview all disabled candidates (as defined by the Equality Act 2010) who satisfy the minimum criteria for the role.

To be eligible for consideration under the DCS, you must be considered disabled under the definition of disability in the Equality Act 2010. This means that you must have or have had in the last 12 months – a physical or mental impairment which has a substantial long-term adverse effect on your ability to carry out normal day-to-day activities.

A ‘long-term effect’ means something that affects you, or is likely to affect you, for at least a year. The definition also includes impairments likely to progress or recur.

**Are you applying under the Disability Confident Scheme?**

**YES** **I would like to apply under the Disability Confident Scheme**

|  |
| --- |
| Do you require any special arrangements if requested to attend for interview?  YES  NO |
| **If YES, please give details e.g. wheelchair access required / sight or hearing impairment etc.** |
|  |

**Employment history and other relevant experience**

In this section, please tell us about your employment history over the last 10 years.

|  |  |
| --- | --- |
| **Current Employer** |  |
| **Name:** |  |
| **Address:** |  |
| **Postcode:** |  |
| **Position Held:** |  |
| **Date Commenced:** |  |
| **Current Salary:** |  |

|  |
| --- |
| **Brief description of your main duties & responsibilities:** |
|  |

|  |
| --- |
| **Period of notice required:** |
|  |

**Previous Employment**

Please give a brief description of your previous posts, starting with the most recent. Please use a continuation sheet if necessary.

|  |
| --- |
| **Name & Address of Employer:** |
|  |
| **Dates From/To:** |
|  |
| **Job Title & Responsibilities:** |
|  |
| **Reason for Leaving:** |
|  |

|  |
| --- |
| **Name & Address of Employer:** |
|  |
| **Dates From/To:** |
|  |
| **Job Title & Responsibilities:** |
|  |
| **Reason for Leaving:** |
|  |

|  |
| --- |
| **Name & Address of Employer:** |
|  |
| **Dates From/To:** |
|  |
| **Job Title & Responsibilities:** |
|  |
| **Reason for Leaving:** |
|  |

|  |
| --- |
| **Name & Address of Employer:** |
|  |
| **Dates From/To:** |
|  |
| **Job Title & Responsibilities:** |
|  |
| **Reason for Leaving:** |
|  |

**Any other relevant experience**

|  |
| --- |
| Please give details of any other experience you consider relevant. This could include voluntary work. (You may leave this section blank.) |
|  |

**Welsh Language Skills and Language Preference**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Please indicate your level of Welsh language ability: | | | | |
|  | **None** | **Basic or Beginner** | **Experienced Welsh Learner** | **Fluent or Advanced** |
| **Speaking** |  |  |  |  |
| **Understanding** |  |  |  |  |
| **Reading** |  |  |  |  |
| **Writing** |  |  |  |  |

|  |  |
| --- | --- |
| Are you able and willing to work in the medium of Welsh? | **\*Yes / No** |

|  |  |
| --- | --- |
| Would you be willing to undertake training to learn or improve your Welsh language skills? | **\*Yes / No** |

|  |  |
| --- | --- |
| Please indicate your preferred language for interview and/or assessment. | **\*Welsh / English** |

|  |  |
| --- | --- |
| Please indicate your preferred language for correspondence about interview, assessment or appointment. | **\*Welsh / English** |
|  |  |
| Should you be offered an appointment, would you like documentation relating to your employment in Welsh or English. | **\*Welsh / English** |

**\* Please delete as appropriate**

**Ability to drive**

|  |  |
| --- | --- |
| **Do you hold a full driving licence valid in the UK?** Yes/No |  |

|  |  |
| --- | --- |
| **If yes, do you have access to a car?** Yes/No |  |

|  |  |
| --- | --- |
| **If yes, do you hold/will you get Business Use Insurance?** Yes/No |  |

|  |  |
| --- | --- |
| **Your Skills (800 words)**  The Ombudsman is committed to improving public services in Wales. Details of the Job Description and Requirements have been sent to you with this application form. Please use this information to tell us in this section how your skills, experience and achievements will help you to contribute in this post to the Ombudsman’s objective. (Continue on a separate sheet if necessary, but please observe word limit.) | |
|  | |
| Word Count |  |

|  |  |
| --- | --- |
| **Supporting Statement (100 word limit)**  Please tell us why you would like to work for the Public Services Ombudsman for Wales in this role. | |
|  | |
| Word Count |  |

**Qualifications, Education & Training**

Starting with the most recent, please list your qualifications, education and membership of professional organisations.

|  |  |  |
| --- | --- | --- |
| **Education** | | |
| **Dates** | **School, University etc.** | **Course of study / Qualifications & Grades achieved** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Training** | | |
| **Dates** | **Training Body** | **Details, including qualifications gained** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Professional Qualifications / Memberships** | | |
| **Dates** | **Body/Organisation** | **Designation / Details of Membership** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Permanent or Fixed Term Contract**

|  |  |
| --- | --- |
| If you are offered a position with the Ombudsman’s office, are you interested in: | |
| Fixed Term Contract? Yes/No |  |
| Permanent Contract ? Yes/No |  |

**References**

Please provide the name and contact details of two referees, one of whom should be your current or last employer. Referees will be contacted following an offer of employment and the Ombudsman reserves the right to contact any or all of your previous employers for additional references if it is felt appropriate.

|  |  |
| --- | --- |
| **Reference 1** | |
| **Name:** |  |
| **Job Title:** |  |
| **Organisation:** |  |
| **Address:** |  |
| **Postcode:** |  |
| **Email Address:** |  |

|  |  |
| --- | --- |
| **Reference 2** | |
| **Name:** |  |
| **Job Title:** |  |
| **Organisation:** |  |
| **Address:** |  |
| **Postcode:** |  |
| **Email Address:** |  |

**This area has been intentionally left blank for printing & anonymisation purposes.**

**Criminal Convictions**

|  |  |
| --- | --- |
| Have you ever been convicted of any criminal offences that are not yet spent under the Rehabilitation of Offenders Act 1974?  Yes / No |  |

If Yes, please provide details in a separate sealed envelope or a separate emailed document showing your name.

**Data Protection**

Under the Data Protection Act 2018, the Public Services Ombudsman for Wales must not retain personal information for longer than necessary. All unsuccessful applications will be kept for 12 months after the closing date for applications.

The Recruitment Panel’s decision notice and master matrix will also be destroyed after 12 months. Individual notes, matrices and score sheets of the Recruitment Panel will be destroyed at the end of the interview process.

The successful applicant’s details will be transferred to their personnel file.

**Consent & Declaration**

For the purposes of the Data Protection Act 2018, I consent to the information contained within this application and any other documents in support of this application, being processed for the purposes of the recruitment process. A copy of our Privacy Notice can be accessed [here](https://www.ombudsman.wales/privacy-notice/).

I declare that the information I have given in this application is true and accurate to the best of my knowledge and I understand that if any false or misleading statements made on this form, subsequently come to light, I may be regarded as ineligible for recruitment or dismissed after my employment has commenced.

**Submission of an application by email confirms consent and your declaration.**

|  |  |
| --- | --- |
| **Signature (if submitting by post):** |  |
| **Print Name** |  |
| **Date:** |  |

**Please return this Application Form, together with the Equality Monitoring Form to:**

[recruitment@ombudsman.wales](mailto:recruitment@ombudsman.wales)

or Recruitment, Public Services Ombudsman for Wales, 1 Ffordd yr Hen Gae, Pencoed CF35 5LJ