# JOB APPLICATION FORM

**Key Details**

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| Position applied for: | Click or tap here to enter text. |
| Job location: | Click or tap here to enter text. |

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| Name: | Click or tap here to enter text. |
| Email address: | Click or tap here to enter text. |
| Telephone Number | Click or tap here to enter text. |

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| Are there any restrictions on your right to work in the UK? Please use the link below for further guidance:[Right to Work](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/774286/Right_to_Work_Checklist.pdf): | Yes [ ]  No [ ]  | **For recruitment purposes only** Are you related to and/or have a close personal relationship with a current employee of Cornwall Air Ambulance? | Yes [ ]  No [ ]  |
| If yes to the above, please state restrictions and expiry date of any permissions: | Click or tap here to enter text. | If yes to the above, please state the name and relationship: | Click or tap here to enter text. |
| Do you have any UNSPENT convictions as outlined in the Rehabilitation of Offenders Act 1974?  | *Note: This includes any unspent convictions that may have been issued in any other country, where it would be an equivalent offence in England and Wales.* *It also includes all unspent convictions or Summary Hearings that have been issued under military law while serving in the Armed Forces in the UK or any other country, where it would be an equivalent offence in England and Wales.**You are not required to disclose any information in relation to convictions that have become SPENT. In these circumstances you should select NO to this question.*Yes [ ]  No [ ]  |
| If yes to the above, please provide further information regarding the conviction. | Click or tap here to enter text. |

**Only the information submitted within the application form will be considered during shortlisting. Please ensure you provide all of the information you feel is relevant to your application for this position.**

**Application Questions**

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| Please provide details of how your knowledge, skills and experience meet the job description?*Note: Please ensure you cover the sections of the job description providing examples of how you meet the requirements of the role.* | Click or tap here to enter text. |
| Please tell us why you are interested in working for Cornwall Air Ambulance? | Click or tap here to enter text. |
| What personal qualities do you have that would make you a good match for Cornwall Air Ambulance? | Click or tap here to enter text. |

**Other Information**

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| Do you require any special arrangements to be made for the interview and selection process on account of a disability? | Yes [ ]  No [ ]  | Do you have a full driving licence? | Yes [ ]  No [ ]  |
| If yes to the above, please tell us if there are any reasonable adjustments we can make to assist you in your application or with our recruitment process. | Click or tap here to enter text. |
| Please complete the Equal Opportunities Form.  | Visit this link to complete the form: [Equal Opportunities Form](https://forms.office.com/r/YQTB0quetH) *Note: This information is recorded for monitoring the effectiveness of Cornwall Air Ambulance’s Equal Opportunities Policy only. The information will not in any way be used as part of the selection process, for which applicants are recruited solely on their ability to do the job for which they are applying. The information provided will be treated as sensitive and held in strictest confidence, separate from your job application form.*  |

By submitting an application for this role, you provide consent for Cornwall Air Ambulance to retain your personal details for use of recruitment purposes only and your personal details will be held in line with the General Data Protection Regulation 2018. Your information will be destroyed after six months [<https://cornwallairambulancetrust.org/privacy-policy/>](https://cornwallairambulancetrust.org/privacy-policy/)

Please note only candidates who complete the above Application Form, Equal Opportunities Form and submit their CV will be put forward for shortlisting. Incomplete Application Forms will not be shortlisted.

**Candidate Checklist - Please return this Application Form, the Equal Opportunities Monitoring Form and your CV by email to** **hr@cornwallairambulancetrust.org**

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| Application Form | Yes [ ]   |
| CV | Yes [ ]   |
| Equal Opportunities Monitoring Form | Yes [ ]   |