# Osmani Trust Application for Employment

Job Title:	Post Reference:	

It is important that you read the guidance notes before completing this application form. Please fully complete this form using type or BLACK ink and CAPITAL letters.

A curriculum vitae is not an acceptable form of application unless stated otherwise.

Applications received after the closing date will not be considered.

Return the completed application form to:

Osmani Trust Osmani Centre 58 Underwood Road London E1 5AW

Telephone: 020 7247 8080

Fax: 020 7247 6453

Email: Muhinur.choudhury@osmanitrust.org

## The information you supply on this form will be treated in confidence **Personal Details:** First Name: Last Name: Address: Post Code: Home Telephone: Daytime Telephone: Mobile Telephone: Nat. Insurance No: **Email Address:** Date of Birth: Male: Female: Are you able to take up employment in the UK Yes: No: with no current immigration restriction Dates not available for interview: If these dates clash with the interview date we will try to re-arrange but cannot guarantee to do this

Date Commenced:  Reason for Leaving:  Date of Leaving:	
Current/ Last Salary:  Date Commenced:  Reason for Leaving:  Period of Notice:	
Current/ Last Salary: Bene Date Commenced: Date of Leav Reason for Leaving: Period of Notice:	
Current/ Last Salary: Bene Date Commenced: Date of Leav Reason for Leaving: Period of Notice:	
Date Commenced:  Reason for Leaving:  Period of Notice:  Date of Leaving	ode:
Reason for Leaving:  Period of Notice:	efits:
Period of Notice:	ving:
Brief description of main duties & responsibilities: Use sepa	
	arate sheet if necessary

Previous Employment of Work Experience Record

Please provide full details of all your previous paid and unpaid employment in date order since leaving full time education, explaining any breaks.

Name of Employer and	Position held, duties and	Reason for	Dates
type of business	responsibilities	leaving	from - to
Hoolth			
Health			
	ays you have been absent from		
work due to sickness in the	ne past twelve months:		
How many periods of absence does this represent?			

# Educational Qualifications & Training obtained from schools/colleges/universities

Name of Schools, Colleges, Universities etc.	Name of Course	Dates from - to	Qualifications and Grades obtained
Universities etc.		110111 - 10	Grades obtained

## Other relevant qualifications or records of achievement

Please provide details of any other relevant qualifications or records of achievement (e.g. courses attended), including membership of professional bodies. Please note, if you are appointed we will need to see your original qualification. *Use separate sheet if necessary.* 

	Level of	Dates	Qualifications and/ or	Professional Qualifications
-	Achievement	from - to	Grades obtained	and Membership of
				Professional Bodies

# Personal Statement Abilities, skills, knowledge and experience Please use this section to explain in detail how you meet all of the requirements of the Person Specification and why you consider yourself suitable for the post. This should include all aspects pf you education and experience, including paid or voluntary work, study or training that are relevant to this position. Use separate sheet if necessary.

## References

· ·	lity for the post you have applied for.  anager. Please note that we reserve the right
to approach any of your previous employers	
Reference 1	Reference 2
Name:	Name:
Job Title:	Job Title:
Work	Work
Relationship:	Relationship:
Organisation:	Organisation:
Address:	Address:
Postcode:	Postcode:
Telephone:	Telephone:
Email:	Email:
May we approach them at this stage?	May we approach them at this stage?
Yes: No:	Yes: No:
<b>Driving Licence Details</b>	
The enclosed post details will state whether	her a driving license is required for the post.
Do you hold a full, clean, current licence which enables you to drive in the UK?	If yes, please state the type of licence:
Yes: No:	
	ovide evidence of your licence before your intment.

## **Declarations Criminal Convictions** Due to the nature of the work undertaken by Osmani Trust and the fact that our key beneficiaries are children and youth, we will undertake Criminal Records Bureau Disclosure on all applicants. Do you have any criminal conviction(s) or police cautions(s)? Yes: No: If 'YES', please complete the following: Nature of offences Date of conviction(s) Sentence imposed In the last three years, have you had a Criminal Records Yes: No: Bureau Disclosure undertaken? If yes please state the CRB reference number: CRB Reference Date of Number: Application: If successful you will be required to provide evidence of your CRB Disclosure before your appointment Certification I certify that all information given in this application is correct to the best of my knowledge. Details of qualifications and work experience may be checked with the organisations and authorities concerned. I understand that, if I conceal any information, or information provided is untrue, and I have been employed, then my contract may be terminated. Signature: Date:

# OSMANI TRUST Employment Monitoring

Osmani Trust has an equality and diversity policy and is keen to ensure that the policy is working effectively. The information you provide will be treated in the strictest confidence and will only be used for statistical monitoring and is not used as part of the interview selection process.

Last Name:  Postcode:	Bangladeshi
Postcode:	
l l	Chinese
Where did you see this job advertised?	Indian
	Pakistani
Name of newspaper, email, friend, etc.	Vietnamese
	Other Asian background (specify)
Gender	Black
Are you: Male Female	Caribbean
	African Somali
A Tower Hamlets Yes No resident?	Other African Other Black background (specify)
Applying for: Full time Part time	
Ethnicity	Mixed or Dual Heritage
White	White and Asian
English	White & Black African
Irish	White & Black Carribean
Welsh	Other Mixed background (specify)
Other	
Please specify	Other (Please specify)

Landon	her side		Dellates / Dellat		
Languages	5.1. 5.11 I		Religion/ Belief		
Do you speak any languages?	of the following		What is your religion	ous belief?	
Bengali	Yes	No	Buddhist	Jewish	
Chinese	Yes	No	Christian	Muslim	
Somali	Yes	No	Hindu	Sikh	
Vietnamese	Yes	No	Other (Specify)		
Other (specify)			None	Declined	
Sexual Orientat	ion		Disability		
How would you de orientation?	fine you sexual		Do you consider yo	ourself to be disabled?	
Bisexual			Yes	S No	
Gay			Hearing Impairment		
Heterosexual			Learning Disability		
Lesbian		Mental Health Issue			
Decline to state			Physical Disability		
			Visual Impairment		
			Other Disability – p	olease state	
Age					
Date of Birth					
_					
Certification					
				pest of my knowledge. The organisations and	
authorities concer	ned. I understand	that, if I cond	ceal any information	, or information	
provided is untrue	, and I have been 6	empioyea, tr	en my contract may	be terminated.	
Г					
Signature:			Da	te:	

# **Our Vision**

'Helping Ordinary People Do Extraordinary Things'

Osmani Trust Osmani Centre 58 Underwood road London E1 5AW (t) 020 7247 8080 (f) 020 7247 6453 (e) info@osmanitrust.org (w) www.osmanitrust.org