# Application form

**Important note**: The text boxes below will expand as you type into them. Please read all instructions and job details carefully prior to completing this form. Please pay particular attention to the Competencies section, referring to the required skills in the person specification and related tasks outlined in the job description.

|  |  |
| --- | --- |
| Position |  |

1. Personal details

|  |  |
| --- | --- |
| First Name Surname: |  |
| Surname/Second Name |  |
| Address: |  |
| Country of Residence |  |
| Email: |  |
| Telephone contact number: |  |

1. Education, professional qualifications and training

Where applicable, please include details of examinations taken or about to be taken for which results are not yet available.

|  |  |  |  |
| --- | --- | --- | --- |
| School / College / University | Dates (from/to) | Course details | Qualification / Grade |
| *Educational qualifications* | | | |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| *Professional qualifications (if any)* | | | |
|  |  |  |  |
|  |  |  |  |
| *Training courses (if relevant)* | | | |
|  |  |  |  |
|  |  |  |  |

1. Work History

We shortlist for positions based on the person specification criteria. Please address the Person Specification document to help fill in your application as accurately as possible.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Current Position | Name/address of employer | Dates (from/to) | Final salary | Reason for leaving |
|  |  |  |  |  |
| Details of responsibilities/achievements: | | | | |
|  | | | | |

*NOTE: If you are not currently in employment please use the box above to let us know why and what you are doing instead.*

Previous Work History:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Position | Name of employer | Dates (from/to) | Final salary | Reason for leaving |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. If there are any periods of time that you were not in education or employment please let us know below what you were doing in this time. Please include the dates.

|  |
| --- |
|  |

1. Supporting Information: Please state how you consider your experience, knowledge, skills and abilities match those of the [SKILLS, QUALITIES AND EXPERIENCE](https://tibetnetwork.org/free1/wp-content/uploads/2021/04/Job-Description_-Campaigns-Coordinator-3.pdf). Wherever possible, provide examples from your experience. This could be from either current or previous employment, volunteering, activism or any other hobbies or interests. It is important that you cover each of the areas detailed since this is the information that will be used for shortlisting. This section should not exceed 1000 words. You can attach separate sheets for this section if you so wish.

*NOTE: The box below will expand as you type into it.*

|  |
| --- |
|  |

1. Referees

Please give the name, address and telephone number of two referees, the first of which should your current employer. The second referee should be another employer from as recent a position as possible. If this is not possible, because you have been in education for example, please provide a referee who can give clear information as to your work abilities and ethics – for example a university tutor. A member of family or friend (unrelated to a work environment) is not sufficient. Please note International Tibet Network will contact referees ahead of making a decision about your employment but not before interview.

|  |  |  |
| --- | --- | --- |
|  | Current or most recent employer | Second referee |
| Name: |  |  |
| Position: |  |  |
| Organisation: |  |  |
| Address: |  |  |
| Phone number: |  |  |
| Email: |  |  |
| How long have they known you and in what capacity ? |  |  |

1. If you are offered the position applied for when you could start?

|  |
| --- |
|  |

1. Declaration

I confirm that all the information included in the is 100% correct. I understand that including false information on this form could render me liable to subsequent summary dismissal. I also agree that my records may be held on a computerised database that is subject to the Data Protection Act 1998.

Signature: If you are unable to scan a signature please mark this area as ‘a *digital*

Date:

# EQUAL OPPORTUNITIES MONITORING FORM

**Please do complete the following form to enable us to monitor International Tibet Network’s equal opportunities compliance. The completion of the form is entirely voluntary and is not required for consideration for employment.**

International Tibet Network is committed to upholding equal opportunities and strives to be equal opportunity employer. We positively encourage applications from suitably qualified and eligible candidates regardless of age, disability, race, sex, gender reassignment, sexual orientation, religion or belief, marriage and civil partnership or caring status.

The information you provide on this form will be used to help achieve that commitment. This information, which will be used solely for monitoring purposes, will be treated as confidential and will be separated from your application on receipt and before any consideration of candidates takes place.

The Executive Director is based in the UK and therefore we request this information, and its use and storage, within the scope of the UK Data Protection Act 1998 which allows for the collation and reporting of sensitive data for monitoring purposes.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **How would you describe your gender?** | Male |  | Female |  |

|  |  |  |
| --- | --- | --- |
| Is your present gender the same as the one assigned at birth? | Yes |  |
| No |  |
| Prefer not to say |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Are you married or in a civil partnership** | Yes |  | No |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Age** | 16-24 |  | 25-34 |  | 35-44 |  | 45-54 |  |
| 55-64 |  | 65+ |  | Prefer not to say | | |  |

**How would you describe your national identity?**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| British |  | English |  | Welsh |  | Scottish |  |
| Northern Irish |  | Other |  | Prefer not to say |  |  | |

**What is your ethnicity?**

Ethnic origin categories are not about nationality, place of birth or citizenship. They are about the group to which you as an individual perceive you belong. Please indicate your ethnic origin by ticking the appropriate box.

## White

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| English |  | Welsh |  | Scottish |  | Northern Irish |  |
| Irish |  | Gypsy /Irish Traveller |  | Any other White background |  | Prefer not to say |  |

## Mixed/multiple ethnic groups

|  |  |  |  |
| --- | --- | --- | --- |
| White and Black Caribbean |  | White and Black African |  |
| White and Asian |  | Any other mixed background |  |

## Asian/Asian British

|  |  |  |  |
| --- | --- | --- | --- |
| Indian |  | Pakistani |  |
| Bangladeshi |  | Chinese |  |
| Any other Asian background |  |  | |

## Black/African/Caribbean/Black British

|  |  |  |  |
| --- | --- | --- | --- |
| African |  | Caribbean |  |
| Any other Black background |  |  | |

## Other ethnic group

|  |  |  |  |
| --- | --- | --- | --- |
| Arab |  | Any other ethnic group |  |
| Prefer not to say |  |  | |

**Disability**

Section 6(1) of the Equality Act 2010 states that a person has a disability if:

1. That person has a physical or mental impairment, and
2. The impairment has a substantial and long-term adverse effect on that person’s ability to carry out normal day-to-day activities.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Using this definition do you consider yourself to be disabled? | Yes |  | No |  | Prefer not to say |  |

**What is your sexual orientation?**

|  |  |  |  |
| --- | --- | --- | --- |
| Heterosexual/straight |  | Gay/lesbian |  |
| Bisexual |  | Other |  |
| Prefer not to say |  |  | |

**What is your religion or belief?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No religion |  | Buddhist |  | Christian |  |
| Hindu |  | Jewish |  | Muslim |  |
| Sikh |  | Any other religion |  | Prefer not to say |  |

**Do you have caring responsibilities?** Please tick all boxes that apply.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Primary carer of a child/children (under 18) |  | Primary carer of disabled child/children |  | None |  |
| Primary carer of disabled adult (18 and over) |  | Primary carer of older person (65+) |  | Secondary carer |  |
| Prefer not to say |  |  | | | |