

The information you provide on this form, and obtained from other relevant sources, such as previous employers, professional bodies etc, will be treated confidentially and used by the Cabinet Office to process your application for employment. The information will be shared with the Department you are applying for employment with and, if you succeed in your application and take up employment with us, it will be used in the administration of your employment. We will, where necessary, check information you supply to us in this application form. Enquiries may be made to determine immigration or work permit status, or to relevant persons such as previous employers or professional bodies.

◆ Mandatory Field / \* Delete as applicable

Post Applied For	Reference Number
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**Personal Details**

Title ◆	Dr/Miss/Mr/Mrs/Ms/Other/Prof*
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Surname ◆	
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Forename(s) ◆	
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Date Of Birth [DD/MM/YYYY] ◆	_ _ / _ _ / _ _ _ _
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Address ◆	
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City/Town ◆	
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Postcode ◆	
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NI Number	
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If you do not have a home landline, please enter your primary contact number in the box provided

Home Telephone Number ◆	
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Mobile Telephone Number	
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Email Address ◆	
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All correspondence regarding interview and offer of appointment will be via email. If you do not wish to receive email correspondence, please indicate	Email Correspondence / Letter Correspondence*
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Which Station do you wish to join? ◆	
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Do you meet or intend to meet the requirements in relation to proximity to that Station (please refer to Guidance Notes for Applicants, Conditions of Offer, (f) for guidance)? ◆	
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If yes, please provide details of how you meet or intend to meet the requirements. ◆	
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## Work Permit Information

Under the provisions of the Control of Employment Acts and the Regulations made thereunder, any person who is not an Isle of Man Worker requires a work permit issued by the Department of Economic Development before taking up employment or self employment in the Isle of Man, except in the case of a few exempted employments.

Are you an Isle of Man Worker as defined by the Control of Employment Acts? ♦ Yes/No/N/A\*

If yes, under which section of the guidance notes do you qualify? Section A/B/C/D/E/F/G/H\*

If living on the Isle of Man, when did you take up residence? \_\_ / \_\_ / \_\_\_\_

If you are married, or in a Civil Partnership, does your partner hold a current Work Permit? Yes/No\*

If yes, which type? Full/3a\*

## Immigration

Immigration Rules place restrictions on the entry of overseas nationals wishing to work in the Isle of Man and the Isle of Man Immigration Legislation does differ from the UK. It is therefore essential the following part of the form is completed as the information you provide below will be used to check your eligibility to work in the Isle of Man.

Are you an IOM/UK/EEA national? ♦ Yes/No\*

If not, do you have the right to work in the UK that is not time limited Yes/No\*

If you have answered yes to the previous question, please state the type of right to work that applies to you:

Do you have limited leave to remain? Yes/No\*

If yes, please specify your current immigration status and the expiry date of your current leave: \_\_ / \_\_ / \_\_\_\_

## Health

Number of absences

Total number of days absent

Should you wish to provide any further details regarding your absences please do so

Do you require any specific arrangement in order to be able to attend an interview? ♦ Yes/No\*

If yes, please provide details

Are you in receipt of an ill health retirement pension? Yes/No\*

## Rehabilitation of Offenders

Do you hold a criminal conviction that is not considered spent in accordance with the Rehabilitation of Offenders Act 2001? ♦ Yes/No\*

Are you currently the subject of any criminal proceedings? ♦ Yes/No\*

If the answer to either of the previous questions is Yes, please supply details

**Please answer the following questions if the role you are applying for is considered exempt under the Rehabilitation of Offenders Act.**

Have you ever been convicted of a criminal offence?	Yes/No*
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If the answer is Yes, please provide details	
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**Miscellaneous**

Do you have a Driving License? ♦	Yes/No*
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If yes, please specify type:	
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If you hold a full licence, which group of vehicles are you licensed to drive?	
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Have you ever previously worked for the Isle of Man Government? ♦	Yes/No*
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If yes, please supply dates and reason for leaving	
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Are you claiming a Government Superannuation? ♦	Yes/No*
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Have you been previously dismissed from any Government Department? ♦	Yes/No*
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Have you ever left a Government role under a Voluntary Redundancy Scheme or Mutually Agreed Resignation/Voluntary Redundancy Scheme? ♦	Yes/No*
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**Advert details**

Where did you hear about this vacancy? ♦	Guardian/Guardian Online/IOM Courier/IOM Examiner/IOM Government Internal Notification/IOM Government Website/Job Centre/Manx Independent/Nursing Times/RCN Bulletin/Other – Please Specify*
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If other, please specify	
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**Academic/Professional Qualifications**

Please enter your academic qualifications Please start with your most recent qualification and work backwards.

If you do not have any qualifications to enter in this section, please move onto the next section.

Secondary/ Further/ Higher (Institution name of training provider/school/college etc. attended)	Professional Body/Quals	Dates Obtained/ To Be Taken	Course/Subject	Grade	Award

**Your Employment History**

Starting with your current or most recent employer and positions held, please enter your employment details below.

Name of Organisation	Position Held	Date From (mm/yy)	Date To (mm/yy)	Salary	Main Duties and Responsibilities	Reason for Leaving

**CV Details**

If you consider it necessary, please give any additional details of experience or any other appropriate facts as a separate document.

Please note, any document you are using should be as supporting information only. The rest of the application form must be fully completed for your application to be accepted.

**Your References**

Please provide the names and contact details of at least two or three persons from whom references may be obtained. One referee must be your present or most recent employer, or course tutor if leaving full time education. References may be taken up prior to interview if you are short listed, unless you indicate otherwise.

**Internal Candidates** only need to supply details of their current Line Manager, and may give additional names if desired.

**External candidates** should not give the names of serving PSC Civil Servants or Police Officers for character references. Referee names should not be given without the consent of the person concerned.

**Your References**

May we approach this referee prior to interview? ♦	Yes/No*	May we approach this referee prior to interview? ♦	Yes/No*
Title		Title	
Name of Referee ♦		Name of Referee ♦	
Organisation / Company ♦		Organisation / Company ♦	
Address ♦		Address ♦	
City / Town ♦		City / Town ♦	
Postcode		Postcode	
Telephone Number		Telephone Number	
Email Address		Email Address	
May we approach this referee prior to interview? ♦	Yes/No*		
Title			
Name of Referee ♦			
Organisation / Company ♦			
Address ♦			
City / Town ♦			
Postcode			
Telephone Number			
Email Address			

## Additional Information

In support of your application, please describe how you meet the essential criteria outlined in the person specification for this post.

What are your reasons for applying for this post?

Please give, in support of your application, additional information that you consider important, for example experience, skills, ability, knowledge, qualities, attributes that are relevant to the post, including your reasons for applying for the post.

## Declaration

I confirm that the information I have provided in this Application Form is correct and, in line with the Data Protection Act, I am happy for this information to be held in a secure place and used in processing my application. I understand that if it is subsequently discovered that any statements are false or misleading I may be liable to have my application disqualified or subsequently may be at risk of being dismissed from employment.

I understand that should I be successful in my application, I am required to notify my employer should any of my declarations contained within this application form change.

### Do you agree with the above declaration ♦

I agree  I don't agree    Signature \_\_\_\_\_ Date \_\_ / \_\_ / \_\_\_\_

## Equal Opportunities

We are committed to promote equal opportunities for all, subject to any statutory obligations which impact on employment. To achieve this we want to ensure that no applicant or employee receives less favourable treatment because of their race, colour, nationality, ethnic or national origin; or on the grounds of their gender, marital status, disability, age, sexual orientation or religion. There is no obligation to complete this section but to assist us in monitoring the effectiveness of our policy, we would be grateful if you could please provide the information requested below. This form will be separated from your application upon receipt, will be stored electronically for statistical purposes and will not be used at any stage of the selection process.

### Gender

- Female
- Male
- Prefer not to say

### Marital Status

- Divorced
- Married/Civil Partnership
- Partner
- Prefer not to say
- Separated
- Single
- Widow

### Do you consider yourself to be disabled?

- Yes
- No
- Prefer not to say

If yes, please specify:

\_\_\_\_\_

### Nationality

- Manx
- British
- European
- Asian
- American

Other, please specify \_\_\_\_\_

**Ethnic Origin**

- Asian
- Black – African
- Black – Caribbean
- Black – Other
- White
- White & Asian
- White & Black African
- White & Black Caribbean
- Asian

Other, please specify \_\_\_\_\_

- Prefer not to say

**Sexual Orientation**

- Bisexual
- Heterosexual
- Homosexual
- Other

If other, please specify \_\_\_\_\_

- Prefer not to say

**Religion**

- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- No religion
- Sikh
- Other

Other, please specify \_\_\_\_\_

- Prefer not to say



**Age Range**

- 20 or under
- 21-25
- 26-30
- 31-40
- 41-50
- 51-59 years
- 60 – 64
- 65 or over
- Prefer not to say