



Application Form Ref. No: 01/23

**Triage & Short-Term Support Worker –
30 hrs per week**

Closing Date: Friday 17th February 2023 @ 5pm

Omagh Women's Aid is an equal opportunities employer and welcomes applications from everyone, from all sections of the community, who meet the criteria for the post.

Please **read the notes** below before completing the application form:

- Complete in black ink or typescript only
- Use font no smaller than point 10
- Do not alter the formatting of the form
- Abide by word limits where applicable
- All sections of the form must be completed and CV's must not be completed.

**Return completed form to:
The Administrative Assistant,
Omagh Women's Aid,
9 Holmview Terrace
Omagh
BT79 0AH
or email emma@omaghwomensaid.org**

For Official Use Only

Date Application received _____

Confidential

Position applied for:

Triage & Short Term Support Worker

1. Personal Details

Surname:

Forenames:

Preferred Title:

Home Address:

Telephone: Day

Evening:

E mail:

If successful, when could you take up the appointment:

Are you eligible to work in the UK?

2. References

Please give the name and address of three referees. Your current or last employer should be one. At least two should ideally be your line manager or alternatively an individual in a higher level position than yourself with an ability to comment on your performance. NB: references will only be contacted with prior agreement of the applicant and only once a provisional job offer subject to references has been made.

	Current/Most recent employer	
Name		
Address		
Telephone		
Email		
Status/Position		
Relationship		
	Other Referee	Other Referee
Name		
Address		
Telephone		
Email		
Status/Position		
Relationship		

3. Education

In chronological order, please give details and results of any relevant qualifications gained, including further and higher education and professional qualifications. Continue on a separate sheet if necessary.

Name & Address of School/University	Subject/Title	Qualification & Grade Attained

4. Current Employment			
Organisation/Employer			
Contact Name			
Employer's Address			
Title of post held			
Date appointed		Date of leaving (if applicable)	
Notice period		Current salary	
Summary of duties of post:			

5. Employment History					
Please start with your most recent role and work backwards. Do not list work placements undertaken as part of a course of study or undertaken as part of gaining a qualification. Continue on a separate sheet if necessary.					
Employer Name & Address	Job title & no. of hours per week	Brief outline of duties	Dates of employment		Reason for leaving
			From	To	

6. Work Placements				
Please list any work placements/experience of more than six weeks duration undertaken in the last five years				
Name & Address of Placement Organisation	Role undertaken	Brief outline of duties	Dates of placement	
			From	To

7. Voluntary Work				
Please list details of any unpaid/voluntary work.				
Name & Address of Organisation	Role undertaken & no. of hours per week	Brief outline of duties	Dates of placement	
			From	To

8. Training & Professional Development					
In chronological order, please give details of any external or internal training or professional development courses undertaken within the last five years. Continue on a separate sheet if necessary.					
Date	Course Title	Training Provider	Length of course	Certification	
				Yes	No

9. Information Communications Technology Skills	
Please provide details of your computer skills and experience in the use of ICT.	
Microsoft Office Packages	
Online Case Management Systems	
General computer skills & other IT packages	

10. Driving Ability		
Do you hold a full current UK Driving Licence?	YES	NO
Do you have access to a car?	YES	NO
Have you been convicted of any motor offences resulting in disqualifications?	YES	NO
Please give details of accidents within last 3 years, endorsements, etc...		

11. Disclosure of Criminal Background		
Have you ever been convicted of any offence, which is not considered spent?	YES	NO
If yes, please give details on a separate sheet.		

12. Medical History
Please provide details of recurring illness or medical problems for which you are receiving attention or medication.

13. Periods of Absence		
Please give details of any illness, operation or accident resulting in an absence from work, paid or unpaid within the last 2 years.		
Illness, operation, or accident	Dates	No. of days absent
Please list other periods of absence and reason for absence (e.g. caring for dependents, exceptional leave, compassionate leave) within the last 2 years.		
Reason for absence	Dates	No. of days absent

14. RELEVANT EXPERIENCE TO THIS POST

Please explain below how you meet the Essential Criteria for this post as listed on the Personnel Specification, ensuring you give clear evidence based professional work examples of how your professional skills, knowledge and experience meet these criteria.

Please Note: The word count for each Essential Criteria should not exceed 300 words per criteria.

Please also demonstrate where appropriate how you meet the Desirable Criteria as this may also be used to shortlist for interview.

Failure to properly complete this section will result in you not being shortlisted for interview.

Experience**Skills & Abilities****Knowledge****Other**

15. Canvassing
Any approach (except for obtaining information about the post) directly or indirectly by or on behalf of the applicant will disqualify this application.

16. Declaration
I certify that all the particulars given are correct and understand that should any false statements/omissions be made on this form Omagh Women's Aid reserves the right of dismissal. I understand that employment with Omagh Women's Aid is subject to receipt of satisfactory references.
Signature of Applicant
Date:

Please return completed form and attachments to the address given on the front page.



We aim to be FAIR Employers. We do not discriminate on the grounds of religion, marital status, disability, race or ethnic origin. We practice equality of opportunity in employment and most importantly, have a firm belief in the MERIT principle (i.e. the best person for the post).

We want to demonstrate this commitment and to do so; we need to monitor certain details of our applicants.

We are, therefore, asking you to give us extra information, which will be treated in the strictest of confidence and used for monitoring purposes only. This extra form will not be filed with your other details, as given on your application form.

We would therefore ask you to complete the attached form. Thank you for your co-operation in this matter.

OMAGH WOMEN'S AID

OMAGH WOMEN'S AID MONITORING QUESTIONNAIRE

IN CONFIDENCE - USED FOR STATISTICAL PURPOSES ONLY

1. PERCEIVED RELIGIOUS AFFILIATION

I perceive myself to be from the Protestant community	
I perceive myself to be from the Catholic community	
I perceive myself to be from neither the Protestant or Catholic community (<i>please specify</i>)	

2. GENDER

I am female		I am male	
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3. MARITAL STATUS

I am married		I am single		I am in a Civil Partnership	
Other					

4. DISABILITY

I have a disability		I do not have a disability	
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5. RACE

Bangladeshi		Black African		Black Caribbean	
Chinese		Indian		Irish Traveller	
Mixed Ethnic Group		Pakistani		White	
Other (<i>please specify</i>)					

It is not compulsory for you to answer the above questions. However, I would stress that it is a criminal offence under the legislation for a person to "give false information in connection with the preparation of a monitoring return.

THANK YOU FOR YOUR CO-OPERATION

When you have completed this questionnaire, please place in a separate sealed envelope marked **F.A.O. The Monitoring Officer** and return with your application form.