

Solicitor/Caseworker

Application Form 2019

Contents

[How to Apply 2](#_Toc20735311)

[Application Form for post of Immigration Solicitor/Caseworker 3](#_Toc20735312)

[Recruitment Monitoring Form 8](#_Toc20735313)

# How to Apply

Please apply using the application form. Please do not send your CV.

You should refer to the documentation in filling out the application form and show how you meet the person specification and can demonstrate the skills that we are seeking.

### Ways to Complete the Forms

1. You can fill the form directly in this pdf using the free Adobe Acrobat Fill & Sign Tool. You can find instructions at <https://helpx.adobe.com/acrobat/using/fill-and-sign.html#fill_your_PDF_form>
2. Alternatively, you can download a Word Version of the required forms at <http://www.lutonlawcentre.org.uk/vacancies/> or request the forms from the office on 01582 482000
3. You can also download or request the forms and fill in by hand.

### Send Your Application.

Please send your completed application form to: pgilson@lutonlawcentre.org.uk.

**There is no deadline for this post. We will be in contact within a week of receiving your application.**

You can also send by post to:

Pauline Gilson

Senior Solicitor

Luton Law Centre

Community House

15 New Bedford Road

Luton LU1 1SA

Please do not hesitate to call with any questions you may have. You may speak to the Centre Director or the Senior Solicitor on 01582 482000.

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| --- | --- |
| **A** | **Personal Details** |
| Name |  |
| Address |  |
| Postcode |  |
| Email |  |
| Daytime telephone |  | Evening telephone |  |
| May we contact you during the day? | YES | NO |

# Application Form for post of Immigration Solicitor/Caseworker

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| --- | --- |
| **B** | **Eligibility** |
| When are you free to take up a post? |  |
| Do you need a work permit or permission from the Home Office to take up this post? | YES | NO |
| National Insurance No.: |  |
| Do you have any criminal convictions?*If yes, please give details in your covering letter.* This should exclude any spent convictions under Section 4(2) of the Rehabilitation of Offenders Act 1974, unless the job for which you are applying involves working with vulnerable adults or children in which case cautions, bindovers, pending prosecutions, spent and unspent convictions must be declared. A criminal conviction is not necessarily a barrier to appointment. A Criminal Records Bureau check will be undertaken. | YES | NO |
| Are you subject to any disciplinary or other restrictions through a professional body (e.g. SRA)?*If yes, please give details in your covering letter.* This is not necessarily a barrier to appointment.  | YES | NO |
| Do you have any disability for which you need special provision? *If yes, please give details in your covering letter.*  | YES | NO |
| **C** | **Referees (Please give the contact details of two referees)** |
| **May we contact your referees prior to offering you the post?** | **Yes** | **No** |
| 1. **Name**
 |  |
| Role |  |
| Address |  |
| Postcode |  |
| Email |  |
| Daytime telephone |  | Evening telephone |  |
| 1. **Name**
 |  |
| Role |  |
| Address |  |
| Postcode |  |
| Email |  |
| Daytime telephone |  | Evening telephone |  |

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| **D** | **Employment History**Please give your employment history, including periods of unemployment or time caring for dependants etc. Please indicate whether full-time, part-time, paid or voluntary, and give dates, starting with the most recent. Continue on additional sheets where necessary.  |
| **From** | **To** | **Employer & Contact Details** |
|  |  |  |
| **Job Title** |  |
| **Reason for Leaving** |  |
| **Salary at this post** |  |
| **Duties/Responsibilities**  |
|  |
| **From** | **To** | **Employer & Contact Details** |
|  |  |  |
| **Job Title** |  |
| **Reason for Leaving** |  |
| **Salary at this post** |  |
| **Duties/Responsibilities**  |
|  |
| **From** | **To** | **Employer & Contact Details** |
|  |  |  |
| **Job Title** |  |
| **Reason for Leaving** |  |
| **Salary at this post** |  |
| **Duties/Responsibilities**  |
|  |
| **From** | **To** | **Employer & Contact Details** |
|  |  |  |
| **Job Title** |  |
| **Reason for Leaving** |  |
| **Salary at this post** |  |
| **Duties/Responsibilities**  |
|  |

|  |  |
| --- | --- |
| **E** | **Education and Training** |
| **From** | **To** | **School/college/university/training provider** |
|  |  |  |
| **Courses Completed/Qualifications Gained** |
|  |
| **From** | **To** | **School/college/university/training provider** |
|  |  |  |
| **Courses Completed/Qualifications Gained** |
|  |
| **From** | **To** | **School/college/university/training provider** |
|  |  |  |
| **Courses Completed/Qualifications Gained** |
|  |
| **From** | **To** | **School/college/university/training provider** |
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| **Courses Completed/Qualifications Gained** |
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| **F. Please outline why your skills and experience match our person specification and skills requirement. You may continue on another sheet to a maximum of 2 A4 sheets.** |
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| I declare that the information given on this form, and in the covering letter provided with it, is correct to the best of my knowledge and understand that by signing this form I give consent to my personal information being recorded and stored in line with the Luton Law Centre Privacy Policy (available online). | Signature |
| Date |  |

# Recruitment Monitoring Form

When we advertise for posts, we like to be able to monitor and check that we are attracting a wide variety of applicants. It is helpful to us if you can complete and return this form, together with your application.

This monitoring form is detached from your application as soon as we receive it, and none of the information contained in it is used for any selection or election purposes.

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| **General Information** |
| Are you | Female |  | Male |  | Other |  | Prefer not to say |  |
| Are you aged | Under 25 |  | 25-40 |  | 40-60 |  | Over 60 |  |

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| --- |
| **How do you describe your ethnic origins:** |
| White British |  | White/Black Caribbean |  | Indian |  |
| White Irish |  | White/Black African |  | Pakistani |  |
| White Other |  | White/Asian |  | Bangladeshi |  |
| Black Caribbean |  | Mixed Other |  | Asian Other |  |
| Black African |  | Chinese |  | Other |  |
| Black Other |  |  |  | Prefer not to say |  |

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| **Do you have a disability?** |
| Not considered disabled |  | Cognitive impairment |  |
| Physical impairment |  | Long-standing illness or condition |  |
| Sensory impairment |  | Other |  |
| Mental Health Condition |  | Prefer not to say |  |
| Learning disability/difficulty |  |  |  |

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| **Religion** |
| Buddhist |  | Muslim |  |
| Christian |  | Sikh |  |
| Hindu |  | Other - please specify |  |
| Jewish |  | Prefer not to say |  |

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| **Sexual Orientation**  |
| Bisexual |  | Gay Woman/Lesbian |  | Gay Man |  |
| Heterosexual/Straight |  | Other |  | Prefer not to say |  |