



To: Applicant	From: HR – CT DIVISION Ext: 489326
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Application for

Before completing this application form please ensure that you have read the Advert and Job Description.

Please read the guidance notes carefully before completing this application form.

- On completion of your application form please ensure your line manager has completed the Line manager sign off section before sending your application.
Please note if your line manager has not copied completed their section on this form your application will be sent back to you and this may delay progression.
- Once your application is fully completed please return to HRCTDivision@essex.pnn.police.uk
- You are then asked to separately complete the equal opportunities monitoring form and return this directly to HRCTDivision@essex.pnn.police.uk

Please note that late applications will only be accepted in extenuating circumstances and with the agreement of the advertising division.

Applicants who are successful at both the paper sift and interview stage will be offered a conditional offer of appointment to the role applied for subject to satisfactory Vetting and checks with Professional Standards regarding conduct. Only when these checks are completed and passed will the applicant be offered an unconditional offer of appointment.

PLEASE NOTE: - Do not make any changes to this form i.e. FONT or FORMAT, any changes made will result in your application form being rejected and returned to you for resubmission.

You are only allowed TWO pages for evidence once you reach the end of the first page, please click in to the second page, DO NOT press the return button or keep typing as your text will disappear.

Name	
Rank	
Collar Number	
Force	
Division / Department	
Current Role	
Work Contact Number	
Home Address	
Home Number	
Mobile number	
Disability	<p>Do you consider yourself to have a disability? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>All candidates declaring a disability who meet the minimum advertised criteria will be interviewed and considered on their abilities. Please provide brief details of the nature of any adjustments/requirements you may need so you are not disadvantaged if selected for interview.</p>
Business Interest	<p>Do you have a job or business interest which you intend to continue with? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If you are successful Corporate vetting must confirm this is still suitable.</p>

Dates not available for interview:

Date	Reason
<p>Candidate Signature:</p>	
<p>Date:</p>	

Line Manager sign off:

Do you fully support this individual's application? Yes ☐ No ☐

If this individual is successful are you able to release them in a timely manner? Yes ☐ No ☐

If no please give brief details why.

Line Manager Signature:	Date:

Self Assessment - (ONLY pages numbered 3 & 4 are to be used for evidence – any other evidence on other pages will NOT be marked)

Self Assessment (CONTINUED)

Please forward the completed application via email to HRCTDivision@essex.pnn.police.uk