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| **Blue text on a black background  Description automatically generated** |
| **Full Name** |  |
| **Email address** |  |
| **Phone number**  |  |
| **Date of Birth** |  |
| **Full address & post code** |  |
| **Gender** | Male [ ]  Female [ ]  Prefer to self-describe [ ]  Prefer not to say [ ]  |
| **Ethnic Origin** | African – Other [ ]  Arab, Arab Scottish, Arab British [ ]  Asian - Bangladeshi, Bangladeshi Scottish, Bangladeshi British [ ]  Asian - Chinese, Chinese Scottish, Chinese British [ ]  Asian - Indian, Indian Scottish or Indian British [ ]  Asian - Pakistani, Pakistani Scottish, Pakistani British [ ]  Asian – Other [ ]  Black, Black Scottish, Black British [ ] Caribbean or Black – Other [ ]  Caribbean, Caribbean Scottish, Caribbean British [ ]  White - Gypsy Traveller [ ]  White – Irish [ ]  White – Other Mixed or multiple ethnic group [ ]  White - British [ ]  White – Polish [ ]  White – Roma [ ]  White – Scottish African, African Scottish, African British [ ]  Not Known [ ]  Prefer not to say [ ]  |
| **Current Employment Status** | Employed [ ]  Unemployed [ ]  Economically Inactive [ ]  In Education [ ]  Self-employed [ ]  |
| **Are you currently working with an employability provider or getting job search support?**  | Yes NoIf yes, please tell us who; |
| **Please let us know if you identify with any of the following categories.**  | Mental health condition [ ]  Physical Disability [ ]  Learning Difficulty [ ]  Long-term health condition [ ]  Migrant [ ] Refugee [ ] Workforce returner [ ] Women new to the construction sector [ ] Young Person Facing Limited Opportunities [ ] Underemployed [ ] Armed Forces veteran [ ] Criminal convictions [ ] Homeless or affected by housing exclusion [ ] Substance-related conditions [ ] Care Experienced [ ] Caring Responsibilities [ ]  |
| **Are there any other barriers that might affect your ability to engage in work or training that you’d like us to be aware of?** |  |
| **Please explain why you are interested in this course & why you should be considered for a place.** |  |
| **Reason for referral?** | Self-referral [ ] Referring on behalf of client[ ] Other[ ] **If ‘other’ or ‘referring on behalf of a client’ please provide your name, organisation, and contact information:**  |
| **Preference to be contacted:** | **Email** [ ]  **Phone** [ ]  **SMS** [ ]  |
| **Before submitting your application, please check the boxes to confirm the following.**  | [ ]  I consent to my details being held securely in line with General Data Protection Regulation (2018) for the purposes of offering future employment or training opportunities within Capital City Partnership projects and our external partner employability providers.[ ]  I confirm that I have the right to work in the UK.  |

The data you enter into the system will be held electronically by Capital City Partnership for the purposes of providing you with employability support, training opportunities and job matching. Any correspondence you receive will be via email/telephone and notifications of vacancies appropriate to your skills and goals. The data is held on a system called Helix that is fully accredited for ISO9001 and ISO27001. You can view our full privacy notice [**here**](https://capitalcitypartnership.co.uk/client-privacy-statement)or ask to have your data removed from the system by emailing iee@capitalcitypartnership.org

**SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

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