**REF: ES/STAFF ID/**



**APPLICATION FORM**

|  |
| --- |
| **Election Staff****(Casual Poll / Count Reserve Pool)** |

The Electoral Office for NI is continually expanding their current list of casual

staff to ensure a sufficient number of staff are available to work at polling

stations and count venues. If you are interested in joining our reserve list,

please indicate your preferred role(s) by ticking the appropriate box(es) below:

 Poll Clerk: Count Assistant:

**Office Use only:**

**Pre-processing**

Right to Work Doc(s) attached: Y / N (If N, do not process / follow-up)

**Processing**

Checked (Pages 2-5): Refer gaps E/H or C/I replies to SBSO, where appropriate

Mobile Number / Email Input:

**Assigned on IDOX (tick):**

Home Electoral Area added 

Preferred Role inc area & location / RTW received 

DRN Linked / ITR link emailed 

Monitoring Details input (see SBSO if CBD) 

Bank Details input / checked 

RTW documentation stored 

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EONI is committed to equality of opportunity and**

**welcomes applications from all sections of the community.**

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| **PERSONAL DETAILS** |
|  |  |
| **Title**  |  |
|  |  |
| **Forename** |  |
|  |  |
| **Middle Name(s)** |  |
|  |  |
| **Surname** |  |
|  |  |
| **Former Surname(s) (if applicable)** |  |
|  |  |
| **Address** |  |
|  |  |
| **Town** |  |
|  |  |
| **Postcode** |  |
|  |  |
| **Date moved to above address:** |  |
|  |  |
| **National Insurance Number** |  |
|  |  |
| **Nationality** |  |
|  |  |
| **Country of Birth** |  |
|  |  |
|  |  |
| **Email address**  |  |
| **Mobile**  |  |
| **Telephone (Home/Work)** |  |

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| **EMPLOYMENT HISTORY (PAST 5 YEARS )** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DATES****month/year** |  | **NAME & ADDRESS OF EMPLOYER** |  | **JOB TITLE** |
| **From**  |  |  |
|  |
| **To**  |
|  |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DATES****month/year** |  | **NAME & ADDRESS OF EMPLOYER** |  | **JOB TITLE** |
| **From**  |  |  |
|  |
| **To**  |
|  |
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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DATES****month/year** |  | **NAME & ADDRESS OF EMPLOYER** |  | **JOB TITLE** |
| **From**  |  |  |
|  |
| **To**  |
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| Give brief details of any time not accounted for/gaps during the last 3 years in any dates in the employment history above:**CONFLICT OF INTEREST** |
| Are you a member of any organisations/societies which might be construedas a potential conflict of interest?  Yes No |
| 1. Public confidence: Is there any other information, employment background, or personal connections, current or previous, which if you were appointed might give rise to public speculation?

 Yes No  |
| (c) Please indicate which of the following activities you have undertaken during the past five years by ticking all relevant boxes and by providing details of your involvement. If you have been or are an Independent, or have sought or obtained office as a representative of a particular interest group, you should state this. Obtained office as a MP, MEP, member of the Assembly, local Councillor or other political office. Stood as a candidate for one of the above offices. Spoken on behalf of a party or candidate.Acted as a political agent.Held office such as Chair, Treasurer of Secretary of a local branch of a party.Canvassed on behalf of a party or helped at elections. Undertaken any other political activity which you consider relevant. |
| If you answered yes to (a) or (b) above, or ticked a box at (c) – please provide further details: |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Have you any criminal convictions in relation to electoral law? YES: NO:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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| **Right to Work and Nationality Requirements** |

Do you require a work permit? YES: NO:  |
| When does it expire: |  |
|  |

 |

Please refer to the relevant section of the Applicant Information Booklet for guidance. If you are applying under categories iv - vii please provide the required information below. Failure to provide the appropriate information **WILL** result in your application being rejected:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|

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|  |
| Share Code (where applicable): |  |
|  |

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| Nationality Response Box: |  |
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| **DECLARATION**  |

1. I have read and understood the information provided in the Applicant Information Booklet.
2. I undertake to inform EONI in writing of any change in my circumstances which may occur between the date of my application and any possible date of appointment.
3. I confirm I am aged 16+ (over compulsory school age)
4. I have no criminal convictions in relation to electoral law
5. I am eligible to work in the UK. (EONI need to have a copy of your ID/proof of eligibility to work in the UK **returned with your application** in order to process the form**.** The most commonly presented documents are: a) UK or Irish passport (even if it has expired and not been renewed); or b) Full birth certificate AND an official document, issued by a government agency or previous employer, giving your NI number and name. If you do not have either of the above combinations please visit www.ukba.homeoffice.gov.uk for guidance on acceptable documents. Original eligibility to work/ID documents will need to be shown prior to your commencing work).
6. I have not been and will not be employed by any candidate or political party in either a paid or a voluntary capacity
7. The responses detailed in this application form are true and accurate to the best of my knowledge and belief. I understand that if I am found to have suppressed any material fact or to have given false answers I will be liable to disqualification as well as being referred to the police for investigation of fraud
8. I understand I may be contacted and invited to complete an electoral registration form, which may enable me to obtain a certificate of employment, where eligible, to vote at the polling station in which I may be employed during elections.

I consent to the processing and retention of my personal data for the purposes of working for EONI and to enable me to form part of any reserve staff pool for further work, where required.

I consent to the sharing of my contact information to allow communication with our support services eg training, and with other EONI staff where required to carry out our functions.

**Signed: Date:**

**Please ensure you enclose the following or we will be unable to process your application:**

 **(✓)**

* completed application form
* completed monitoring form
* completed bank details form
* a copy of ID/proof of eligibility to work in the UK

**All the above documents should be returned by email or posted to:**

recruitment@eoni.org.uk

Business Support Unit

Electoral Office for NI

Colby House

Stranmillis Court

Belfast BT9 5TA

🕾 028 9044 6680

If you have any queries or require this application in an alternative accessible format, please contact the HR Section by telephoning 02890 446680.

**REF: ES/STAFF ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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|  **EQUAL OPPORTUNITIES MONITORING** |

**(Return with your application form)**

**PLEASE NOTE THIS FORM IS REGARDED AS PART OF YOUR APPLICATION AND FAILURE TO COMPLETE AND RETURN IT WILL RESULT IN DISQUALIFICATION**

Monitoring is carried out to ensure that our equal opportunity policy is effectively implemented.

This information will be used only for monitoring the effectiveness of the Electoral Office for Northern Ireland’s equal opportunities policy and to comply with obligations under the requirements of the Fair Employment and Treatment (Northern Ireland) Order 1998. It will not play a part in the appointment process and will be treated in the strictest confidence.

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| --- | --- | --- | --- | --- |
| **Gender** |  |  |  |  |
| Please tick one box: | Male |  | Female |  |

|  |
| --- |
| **National Insurance Number** |
| Please provide your National Insurance Number |   |  |  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Age** |  | Day | Month | Year |
| Please give your date of birth: |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Marital Status**Please indicate your marital status by ticking one box below:

|  |  |
| --- | --- |
| Single, that is never married or in a civil partnership |  |
| Married/co-habiting |  |
| In a civil partnership |  |
| Divorced/Separated |  |
| Widowed |  |

**Racial Monitoring**The Race Relations (Northern Ireland) Order 1997 makes it unlawful to discriminate in employment on grounds of colour, race, nationality or ethnic or national origins. We monitor our workforce in line with recommended good practice.***HR Use – CAT ‘A’***Please indicate your racial origin by ticking one of the boxes below:

|  |  |  |  |
| --- | --- | --- | --- |
| White |  | Chinese |  |
| Black African |  | Indian |  |
| Black Caribbean |  | Pakistani |  |
| Bangladeshi |  | Black other |  |
| Other – please specify |  |

|  |
| --- |
| ***HR Use – CAT ‘B’***Are you a member of a Mixed Ethnic Group? |
| Yes |  |
| No |  |

|  |
| --- |
| Are you a member of the Irish Travelling Community? |
| Yes |  |
| No |  |

 |
| Please indicate your community background by ticking the appropriate box below: |
| I have a Protestant community background |  |
| I have a Roman Catholic community background |  |
| I have neither a Protestant or Roman Catholic community background |  |

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| **Disability** |
| The Disability Discrimination Act 1995 makes it unlawful for an employer to treat a disabled person less favourably than someone else because of their disability, unless there is a good reason. Under the Disability Discrimination Act 1995 a person is considered to have a disability if he/she has a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day to day activities. Do you consider that you meet this definition of disability? (Please tick one box below): |
| Yes |  |
| No |  |

If Yes, Nature of Disability: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Dependants** |
| Do you have a personal responsibility for the care of a child or children, a person with a disability or a dependant older person? Please tick one box: |
| Yes |  |
| No |  |

**Sexual Orientation**

Please consider the statement below and tick one box:

My sexual orientation is towards someone:

|  |  |
| --- | --- |
| Of a different sex (this covers heterosexual men and women) |  |
| Of the same sex (this covers gay men and lesbians) |  |
| Of the same sex and the opposite sex (bisexual) |  |
| Prefer not to answer |  |

|  |
| --- |
| **Political Opinion**Please indicate your political opinion by ticking one of the boxes below: |
|  |
| Unionist generally |  | Nationalist generally |  |
| Other |  | Prefer not to answer |  |

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| **Religious Belief**Please indicate your religious belief by ticking one of the boxes below: |
|  |
| Christian |  | Muslim |  |
| Hindu |  | Buddhist |  |
| Other |  | Prefer not to answer |  |

**Language**

Is English your first language? (Please tick one box below):

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**For information on how we process and manage your personal data please visit** [**www.eoni.org.uk/Utility/About-EONI**](http://www.eoni.org.uk/Utility/About-EONI) **to access EONI’s Privacy Notices.**

**REF: ES/STAFF ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **BANK DETAILS FORM** |

**(Return with your Application)**

If you are appointed payment for working during the election period will be made through your bank (BACS) normally within 6-8 weeks.

The information you provide below will be processed and securely stored and only used if you are appointed. Please complete the following details:

|  |  |  |
| --- | --- | --- |
| Surname |  |  |
|  |  |  |
| Forenames |  |  |
|  |  |  |
| Address |  |  |
|  |  |  |
|  |  |  |
| Postcode |  | Date of Birth |

National Insurance Number

**Bank / Building Society Account Details**

|  |  |
| --- | --- |
| Name of Bank / Building Society |  |
|  |
| Branch |  |  |  |  |
|  |
| Address |  |  |  |  |
|  |
|  |
|  |
| Sort Code (Must be 6 Numbers) |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Account Number (Must be 8 Numbers) |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Roll Reference/User Reference |  |  |  |  |  |  |  |  |
| (May apply to some Building Society accounts) |
|  |  |  |  |