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| HR reference | 0000002906/ |

**Belfast City Council**

Application for appointment as:

**Cemetery Supervisor (Grade 5)**

**(There are currently two permanent, full-time posts. Other full-time, part-time, job share, temporary and permanent posts may be filled from a reserve list.)**

**City Services: Bereavement Services Section**

**City and Neighbourhood Services Department**

|  |  |
| --- | --- |
| Name of Applicant: |  |
| Address: |  |
| The closing date for applications is **4pm on Monday, 23 December 2024.**  Completed application forms should be emailed to [jobs@belfastcity.gov.uk](mailto:jobs@belfastcity.gov.uk) and you will receive an automatic acknowledgement reply when your application has been received. If you don’t receive an automatic acknowledgement reply within 30 minutes, please email [jobs@belfastcity.gov.uk](mailto:jobs@belfastcity.gov.uk) again to query this and, or confirm receipt of your application form (office hours are normally Mon-Thurs 8.30am-5pm, Fri 8.30am-4.30pm). You must receive an automatic acknowledgement reply **before** the closing date and time as we will not be able to accept applications that are sent but not received before the closing date and time.  **Please note we are unable to issue or receive any hard copy application forms either by post or hand delivered. All application forms must be emailed to** [**jobs@belfastcity.gov.uk**](mailto:jobs@belfastcity.gov.uk) | |

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| **If you have a disability and require any reasonable adjustments, or your first language is not English and you require any assistance with any aspect of our recruitment and selection process, please email** [**jobs@belfastcity.gov.uk**](mailto:jobs@belfastcity.gov.uk) |
|  |
| **Belfast City Council is an equal opportunities employer and we welcome applications from all sections of the community** |

In addition to filling the immediate vacancies, we also intend to create a reserve list of successful applicants, in strict order of merit based on performance at interview. We anticipate that this list will last for 12 months, or until it is exhausted, whichever is sooner.

Therefore, should a similar post to the immediate vacancies become available within this time we may offer it to those on the reserve list, in order of merit, without further interview.

**These posts may be either on a permanent or temporary (including fixed term) basis and may be working full-time, part-time or job share hours.**

Please indicate below whether you would be interested in a permanent or temporary (including fixed term) post working full-time, part-time or job share hours by ticking the appropriate box.

**If you are interested in both permanent and temporary positions, please tick *(*🗸*)* both boxes.**

**Contract type:**

**Permanent Temporary**

**(including fixed term)**

**Hours of work:**

**Full-time Part-time Job share**

You can apply for all positions and, if appointed to the reserve list, you will be considered for permanent and temporary vacancies and for full-time, part-time and job share hours.

If you apply for all positions, you can accept an offer of temporary employment without giving up your right to be considered for a permanent post. Similarly, you can accept a post working part-time hours without giving up your right to be offered a post working full-time hours.

**It is important to note: If you are placed on the reserve list, you will only be offered vacant posts on the basis of the information you have provided above. For example, if you have ticked that you are applying for a permanent position only and a temporary position becomes available, we will not offer you this temporary post. Similarly, if you have ticked that you wish to be considered for full-time hours only and a part-time post becomes available, we will not offer you this part-time post.**

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| --- | --- | --- | --- | --- | --- | --- |
| **Section 1: Personal details** | | | | | | |
| Are you currently employed by Belfast City Council? | | | Yes |  | No |  |
| If yes, please enter your staff number: | | |  | | | |
| Have you been previously employed by Belfast City Council? | | | Yes |  | No |  |
|  | | |  |  |  |  |
| If yes, please state your reason for leaving: | | | | | | |
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|  |  | | | | | |
| **1.** | **Your details** | | | | | |
| (a) | Title: (Mr, Mrs, Ms, Miss, Mx, Dr etc) |  | | | | |
|  |  |  | | | | |
| (b) | Forenames: |  | | | | |
|  |  |  | | | | |
| (c) | Preferred name: |  | | | | |
|  |  |  | | | | |
| (d) | Surname: |  | | | | |
|  |  |  | | | | |
| **2.** | **Contact details** | | | | | |
| (a) | Telephone number: |  | | | | |
|  |  |  | | | | |
|  |  |  | | | | |
| (b) | Email address: |  | | | | |
|  |  |  | | | | |
| (c) | Address 1: |  | | | | |
|  |  |  | | | | |
| (d) | Address 2: |  | | | | |
|  |  |  | | | | |
| (e) | Town: |  | | | | |
|  |  |  | | | | |
| (f) | County: |  | | | | |
|  |  |  | | | | |
| (g) | Postcode: |  | | | | |
|  |  |  | | | | |
| **3.** | **Other information** | | | | | |
|  | National insurance number: |  | | | | |

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| **Section 2: Employment history** |

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| **4.** | | | | | | |
| (a) | Details of current employment and current position held: | | | | | |
|  |  | | | | | |
| Name and address of current employer (if any): | | | Exact date employment commenced (dd/mm/yyyy): | Position held with current employer: | | Salary: |
|  | | |  |  | |  |
|  |  | | | | | |
| (b) | Details of previous employment and positions held: | | | | | |
|  |  | | | | | |
| Name and address of previous employer(s): | | From:  (dd/mm/yyyy) | | To:  (dd/mm/yyyy) | Position(s) held: | Salary: |
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| **Section 3: Driving licence and experience** | | | | | | | | | | | | |
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| **5**. | Do you hold a full, current driving licence which enables you to drive in Northern Ireland **or** have access to a form of transport which enables you to meet the requirements of the post in full[[1]](#footnote-1)? | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | Yes |  | |  | No |  |  | | | | | |
|  | | | | | | | | | | | | |
| If you have answered yes to the above question, please also provide details of your driving licence number, start and expiry dates: | | | | | | | | | | | | |
| Licence number: | | |  | | | | | Start date: |  | Expiry date: |  | |
|  | | | | | | | | | | | | |
| **By providing this information, you are consenting to Belfast City Council verifying your licence details with the Driver and Vehicle Agency (NI).** | | | | | | | | | | | | |
| **You must complete the application form in either typescript (Arial font size 11) or legible hand-writing using black ink. You must limit your text in this section, i.e. (b) to (d), to no more than one A4 page per criterion. You must not use continuation sheets. If you submit more than one page per criterion, the short-listing panel will only consider the first page of information and you may not be short-listed.**  Applicants **must**, as at the closing date for receipt of application forms, be able to demonstrate by providing personal and specific examples on the application form, that they meet the experience as stated in the employee specification.  **Essential criteria**  Applicants **must**, as at the closing date for receipt of application forms,be able to demonstrate by providing personal and specific examples on the application form that they have at least one year’s relevant experience in at least **two** of the following three areas:   1. supervising frontline staff on a daily basis; 2. undertaking relevant grounds maintenance; cemeteries environment, arboriculture or cleansing operations; and, or 3. assisting in the preparation and implementation of work programmes including assisting in carrying out risk assessments and ensuring relevant health and safety requirements are met.   **Short-listing criteria**  In addition to the above driving licence and experience, applicants **must**, as at the closing date for receipt of application forms,be able to demonstrate by providing personal and specific examples on the application form that they have at least one year’s relevant experience in all **three** of the above noted areas (a – c), | | | | | | | | | | | |

**In boxes (a) – (c) overleaf, please provide the following detail:**

1. You must clearly state the start and end dates of your relevant experience including the number of years’ experience you have in this area. You must clearly detail your job role; the number of frontline staff you supervised; the levels and range of these staff; how you supervised these staff; the frequency of your supervision of staff; the outcome of your supervision of staff, how you monitored and allocated work, etc.
2. You must clearly state the start and end dates of your relevant experience including the number of years’ experience you have in this area. Please detail the type of grounds maintenance; horticulture; cemeteries; arboriculture or cleansing operations you have carried out; what your specific role and duties were within these operations, the range of equipment you used, the purpose and outcome of the work you did, etc.
3. You must clearly state the start and end dates of your relevant experience including the number of years’ experience you have in this area. Please detail the range of work programmes you have assisted in preparing and implementing including what these work programmes were; who they were for; how you ensured they were appropriate; the range and type of risk assessments you have carried out; what this involved; who or what you have carried out risk assessments for; where you have carried out risk assessments; how often you have carried out risk assessments; the range and type of health and safety requirements you have had to ensure are met; what this involved, etc.

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| **(a)** | **Please demonstrate in this box, by providing personal and specific examples, that you have at least one year’s relevant experience of supervising frontline staff on a daily basis.**  Continuation sheets must not be used |

|  |  |
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| **(b)** | **Please demonstrate in this box, by providing personal and specific examples, that you have at least one year’s relevant experience of undertaking relevant grounds maintenance; horticulture; sports ground; arboriculture or cleansing operations.**  Continuation sheets must not be used |

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| **(c)** | **Please demonstrate in this box, by providing personal and specific examples, that you have at least one year’s relevant experience of assisting in the preparation and implementation of work programmes including assisting in carrying out risk assessments and ensuring relevant health and safety requirements are met.**  Continuation sheets must not be used |

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| **Section 4: Other information** | | |
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| **6.** | Notice required to terminate present position: |  |
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I certify that the above information is correct and understand that any false or misleading information, if proved, may result in no further action being taken on this application, or, if appointed, dismissal from the service of the council.

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| Signed: |  |  |  | Date: |  |  |

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| **Equal opportunity monitoring form** | | |
|  | HR Reference number: | 0000002906/ |
| Belfast City Council is committed to ensuring that all eligible persons have equality of opportunity for employment and advancement in the council on the basis of ability, qualifications and aptitude for the work. To ensure the effective implementation of the Equal Opportunities Policy all applicants are requested to complete the following questionnaire. This questionnaire will be removed from your application form and will be strictly controlled in accordance with the Code of Practice on Monitoring agreed with Trade Unions.  **This questionnaire will not be seen by either the short-listing or interview panels.** | | |

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| **Personal details:** | |  | **Official use only:** | |
| **Date of birth:** |  |  | Dob |  |

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| **Gender Identity:** | | | | | | | | | | | | | | | | | | | Gender Identity |  | |
| **What best describes your gender?** | | | | | | | | | | | | | | | | | | |
| Man |  |  | Woman |  |  | Non-binary | | |  | |  | Prefer not to say | | |  | |  | |  |  | |
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| I use another term (for example, Intersex), please specify: | | | | | | | | | | | | | | |  | |  | |  |  | |
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| **Do you consider yourself to be trans\* or transgender\*\*?** | | | | | | | | | | | | | | | | |  | |  |  | |
| Yes |  |  | No |  |  | | Unsure |  | | |  | Prefer not to say | | |  | |  | |  |  | |
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| *\** Trans can be used as an umbrella term to describe people whose gender is not the same as, nor does it sit comfortably with, the sex they were assigned at birth. Trans people may describe themselves using one or more of a wide variety of terms e.g. transgender, transsexual, gender-queer (GQ), gender-fluid, non-binary, crossdresser, genderless. The use of trans as an umbrella term may not be acceptable to all transgender people. | | | | | | | | | | | | | | | | |  | |  |  | |
| *\*\** Someone who intends to transition, is transitioning or has transitioned from the gender they were assigned at birth. | | | | | | | | | | | | | | | | |  | |  |  | |

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| **Family status:** | Married |  | |  |  | Single |  |  |  |  | Status |  |
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|  | Divorced |  | |  |  | Separated |  |  |  |  |  |  |
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|  | Widowed |  |  | |  | Cohabitant |  |  |  |  |  |  |
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|  | Civil partnership | | | |  | Dissolved civil partnership | | |  |  |  |  |
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|  | Prefer not to answer | | | |  |  | | |  |  |  |  |
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|  | Other, please specify | | | | |  | | | |  |  |  |

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| **Ethnic origins:** | White | |  |  | Indian | | |  |  |  | Ethnic origin | | | |
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|  | Pakistani | |  |  | Bangladeshi | | |  |  |  |  |  | | |
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|  | Chinese | |  |  | Irish Traveller | | |  |  |  |  | | |  |
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|  | Black African | |  |  | Black Caribbean | | |  |  |  |  | | | |
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|  | Prefer not to answer | | |  |  | | |  |  |  |  | | | |
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|  | Black other, please specify | | | | |  | | | |  |  | | |  |
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|  | Mixed ethnic group, please | | | | |  | | | |  |  | | |  |
|  | specify | | | | |  | | | |  |  | | |  |
|  | Other, please specify | | | | |  | | | |  |  | | |  |
| Please state your nationality or citizenship (for example, British, Irish, Polish): | | | | | | | | | |  | Nation | | |  |
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| **Persons with and without a disability:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A person has a disability if they have “a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities” (Disability Discrimination Act, 1995) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you, in accordance with the above, have** | | | | | | | | | | | | | | |  | | Yes | |  | | |  | | | No | | | | |  | | |  | | | Disability | |  | | |
| **a disability?** | | | | | | | | | | | | | | |  | |  | | |  | | |  | | | | |  | | |
|  | | | | | | | | | | | | | | |  | | Prefer not to answer | | | | | | | | | | | | |  | | |  | | |  | |  | | |
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| If yes, please state nature of disability: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | |
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| **If No, have you ever had a disability?** | | | | | | | | | | | | | | |  | | Yes | | | |  | | |  | No | | | | |  | | |  | | | History | |  | | |
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|  | | | | | | | | | | | | | | |  | | Prefer not to answer | | | | | | | | | | | | |  | | |  | | |  | |  | | |
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| While the selection panel will be made aware that you have a disability for the purposes of operating the Guaranteed Interview Scheme, they will not know the nature of your disability or if you need any reasonable adjustments as part of the recruitment and selection process unless you advise them. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |  | | |
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| Therefore, if you require any reasonable adjustments as part of the recruitment and selection process, please outline them: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |  | | |
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| If you wish to discuss any of this information further or you require any further clarification about the Guaranteed Interview Scheme, please feel free to contact our Helpline on **(028) 9027 0640** and we will be happy to help. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |  | | |
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| In addition, if you are aware of any adjustments that you will require, should you be successful in obtaining the job, please outline them: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |  | | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Official use only:** | | |
| **Persons with and without dependants:**  **If yes, please tick the relevant box(es) below- you may tick more than one box** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| Do you look after or are you responsible for caring for | | | | | | | | | | | | | | | | | | |  | | Yes | | |  | | |  | | No | | | |  | | |  | | Dependants | | |
| anyone? | | | | |  | | | | |  | | |  | |  | | | | | | | | |  | | | |  | |  | | | | | | | |  | |  |
|  | | | | |  | | | | |  | | |  | |  | | | | | | | | |  | | | |  | |  | | | | | | | |  | |  |
| **If yes, please tick the relevant box(es) below- you may tick more than one box** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  |
|  | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | |  | |  |
|  | | Children | |  | |  | Relative | | | | |  | |  | | | A person with a disability | | | | | | | | | | | | | | |  | | |  | | |  | |  |
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|  | | | Prefer not to answer | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  |
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|  | | | Other, please specify: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |  |

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| **Sexual orientation:** | | | | | |
| **What best describes your sexual orientation?** | | | | | |
|  |  |  |  |  | |
| Bi |  |  |  | Orientation |  |
|  |  |  |  |  | |
| Gay/lesbian |  |  |  |  |  |
|  |  |  |  |  | |
| Heterosexual/straight |  |  |  |  | |
|  |  |  |  |  | |
| Prefer not to say |  |  |  |  | |
|  |  |  |  |  | |
| I use another term, please specify: |  |  |  |  | |
|  |  |  |  |  | |
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| **Religious affiliation or community background:** | | | | | |
| The council is required by The Fair Employment and Treatment (NI) Order 1998 to monitor the perceived religious affiliation or community background of its employees and applicants. In accordance with the Monitoring Regulations 1999, we are asking you to indicate the community to which you belong by ticking the appropriate box below: | | | | | |
|  |  |  |  |  | |
| I am a member of the Protestant community |  |  |  | Code |  |
|  |  |  |  |  | |
| I am a member of the Roman Catholic community |  |  |  | Method |  |
|  |  |  |  |  | |
| I am a member of neither the Protestant nor Roman Catholic communities |  |  |  |  | |
|  |  |  |  |  | |
| Prefer not to answer |  |  |  |  | |
|  |  |  |  |  | |
| **Please note:** If you do not complete this section, we are encouraged to use the ‘residuary’ method, which means that we can make a determination on the basis of personal information on your application form. | | | | | |

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| **Religious belief or tradition:** |  |  | | | |  | |
| Please specify your religious belief, for example, Christian, Hindu, Muslim: |  | | | |  | Religious belief |  |
|  |  |  | | | |  |  |
| No religious belief |  |  |  |  | |  | |
|  |  |  | | | |  | |
| Not disclosed |  |  |  |  | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Additional information:** | | | | | | | | | | | | |
| To monitor the effectiveness of our advertising, please indicate where you saw this job advertised: | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  | |  |  |  | |
| Belfast Telegraph |  |  |  | Irish News |  |  |  | Newsletter | |  |  | |
|  |  |  |  |  |  |  |  |  | |  |  |  | |
| Sunday Life |  |  |  | Specialist journal |  |  |  | LinkedIn | |  |  | |
|  |  |  |  |  |  |  |  |  | |  |  |  | |
| Council trawl |  |  |  | Council website |  |  |  | Nijobfinder.co.uk | |  |  | |
|  |  |  |  |  |  |  |  |  | |  |  |  | |
| Facebook |  |  |  | Twitter |  |  |  | Word of mouth | |  |  | |
|  |  |  |  |  |  |  |  |  | |  |  |  | |
| Department of Learning, |  |  |  | Executive search |  |  |  | Localgovernmentjobsni.gov.uk | |  |  | |
| Jobs and Benefits |  |  |  |  | |  |  |  | | | | |
|  |  |  |  |  |  | | | | | | |  | |
| Other, please state where: |  |  | | | | | | |  | | |  | |

1. Please be advised that this alternative is a ‘reasonable adjustment’ specifically for applicants with disabilities who, as a result of their disability, are unable to hold a full, current driving licence. However, please also be advised that given the business need for the post holder to visit council owned parks, open spaces and cemeteries across the city, the ‘reasonableness’ of this adjustment will be thoroughly considered prior to any appointment being made. [↑](#footnote-ref-1)