Seren Ffestiniog Cyf

Cefnogi pobl gydag anabledd dysgu – Supporting people with learning disabilities

Unit 1 & 2 Llwyngell Industrial Estate, Blaenau Ffestiniog, Gwynedd, LL41 3NE 01766832378 www.serencyf.org

**Ffurflen Gais/Application Form**

Swydd y Ceisir amdani:

Post Applied For:

**Manylion Personol/Personal Details**

Cyfenw/Surname: Enwau Eraill/Other Names: Teitl/Title:

Cyfeiriad /Address:

Côd Post/Post Code:

Rhif ffon/Telephone Number: Ffon Symudol/Mobile Phone:

Cyfeiriad E Bost /E mail Address

Rhif Y.C. /N.I. Number

**Trwydded Yrru Gyfredol/Current Driving Licence**

Oes [ ] Na [ ]

Grŵp:/Group

|  |
| --- |
| **A oesunrhyw gyfyngiadau I chi weithio ym mhrydain? / *Are there any restrictions on you taking up employment in the uk?*** |
| Oes/Yes [ ] Na/No [ ]  Oes oes, rhowch fanylion/If Yes, Please include further information: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Gwybodaeth o’r Gymraeg/*Knowledge of Welsh* (Rhowch dic /Tick)** | | | | |
|  | Rhugl/Fluent | Da/Good | Ychydig/Some understanding | Dim/ None |
| Darllen/Reading |  |  |  |  |
| Ysgrifennu/Writing |  |  |  |  |
| Siarad/Speaking |  |  |  |  |

**Addysg Education**

|  |  |  |  |
| --- | --- | --- | --- |
| O/From | Hyd/To | Ysgol/Coleg/Prifysgol  School/College/University | Cymwysterau a enillwyd ynghyd a graddau a dyddiadau  Qualifications Obtained with grades and dates |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |

**Swydd bresennol/Present Position**

|  |  |  |  |
| --- | --- | --- | --- |
| Title/Teitl: |  | | |
| Enw’r Gyflogwr/Name of Employer | Cyfeiriad/Address | Dyddiad Apwyntiad/  Date Appointed | Cyflog/Salary |
|  |  |  |  |
| **Disgrifiad cryno o’ch dyletswyddau a’ch cyfrifoldebau /Brief Description of duties and responsibilities** | | | |

**Swyddi Blaenorol/Employment History:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Cyflogwr**  **Employer** | **Eich Swydd**  **Position held** | **Llawn Amser/Rhan Amser**  **Full Time /Part Time** | **O**  **From** | **Hyd**  **To** | **Math o waith**  **Type of work** |

**Rheswm gadael/Reason for Leaving**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Cyflogwr**  **Employer** | **Eich Swydd**  **Position held** | **Llawn Amser/Rhan Amser**  **Full Time /Part Time** | **O**  **From** | **Hyd**  **To** | **Math o waith**  **Type of work** |

**Rheswm gadael/Reason for Leaving**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Cyflogwr**  **Employer** | **Eich Swydd**  **Position held** | **Llawn Amser/Rhan Amser**  **Full Time /Part Time** | **O**  **From** | **Hyd**  **To** | **Math o waith**  **Type of work** |

**Rheswm gadael/Reason for Leaving**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Cyflogwr**  **Employer** | **Eich Swydd**  **Position held** | **Llawn Amser/Rhan Amser**  **Full Time /Part Time** | **O**  **From** | **Hyd**  **To** | **Math o waith**  **Type of work** |

**Rheswm gadael/Reason for Leaving**

**Lle dangosir cyfnod o beidio a gweithio, rhowch fanylion yn esbonio hynny isod**

**Where breaks of service are shown please give explanatory details**

**Profiad Perthnasol ynghyd a’ch diddordebau i cefnogi eich cais am y swydd yma**

**Relevant Experience and interest to support you application**

**Aelodaeth o gyrff proffesiynol /Member of Professional bodies:**

**Canolwyr/Referees**

Nodwch yma enwau a chyfeiriadau dau berson y cawn gysylltu a hwy cyn y cyfweliad

Hoffwn i un fod yn gyn gyflogwr

Please state below details of two people to whom a reference may be obtained before the interview, one being a previous employer.

**1.**

Enw/Name:

Swydd/Occupation:

Cyfeiriad/Address:

Côd Post/Post Code:

E Bost/Email:

Rhif Ffon­/Telephone Number:

**2.**

Enw/Name:

Swydd/Occupation:

Cyfeiriad/Address:

Côd Post/Post Code:

E Bost/Email:

Rhif Ffon­/Telephone Number:

Nodwch **os nad** ydych am inni gysylltu a’ch cyflogwr presennol cyn cyfweld:

Indicate if you **do not wish** your current employer to be contacted prior to the interview:

**Rhybuddion, adferiad neu gofnod troseddol**

Oherwydd natur y gwaith yr ydych yn ymgeisio amdano mae’r swydd wedi ei neilltuo o Ddeddf Adfer Troseddwyr 1974 Cymal 4 (2), gan Orchymyn Neilltuo 1975 a gwelliant Gorchymyn Eithriadau (Gwelliant) 1986 sydd yn golygu bod rhaid dadlennu troseddau sydd wedi eu gwario o dan Ddeddf Adfer Troseddwyr 1974. Byddem yn ystyried hyn wrth wneud penderfyniad ar yr apwyntiad. Bydd unrhyw wybodaeth yn cael ei gadw yn gyfrinachol a dim ond yn gyd-destun yr apwyntiad hwn y caiff ei ystyried.

Yn ogystal bydd rhaid gwneud cais i’r Biwro Cofnodi Troseddi. Bydd unrhyw wybodaeth a dderbynnir yn cael ei gadw yn hollol gyfrinachol.

A ydych wedi eich barnu’n euog mewn Llys Cyfraith neu wedi derbyn rhybudd parthed unrhyw drosedd?

Ydw [ ] Nac ydw [ ]

Os yr ydych , yna rhowch fanylion:

**Cautions, rehabilitation and criminal records**

All organisations using the Disclosure and Barring Service and / or Disclosure Scotland to help assess the suitability of applicants for positions of trust and who are recipients of disclosure information must comply fully with the relevant Code of Practice. Amongst other things this obliges them to have a written policy on the recruitment of ex-offenders. This must be given to all applicants for posts where a disclosure will be requested. The Code also requires such organisations to have a written policy on the correct handling and safekeeping of Disclosure information. To assist organisations in meeting this requirement a sample policy statement on the recruitments of ex-offenders will be included with any stationary request for Form AP2(H).

Have you ever been convicted in a Court of Law and / or cautioned in respect of any offence?

Yes [ ] No [ ]

If YES, please give details:

**Gofynion Arbennig (Sector Gofal)**

Gan fod y swydd hon yn golygu gofal oedolion bregus, mae penodiad yn ddibynnol ar:

1) Hawl ysgrifenedig gennych yn caniatáu i ni gael tystysgrif briodol gan Fiwro Cofnod Troseddol neu gorff cyffelyb

2) Bod y dadleniad yn dderbyniol i ni.

3) Prawf o’ch hunaniaeth – tystysgrif geni neu briodas a phasbort

4) Dau eirda derbyniol

5) Eich bod yn cael llun ohonoch ar gyfer eich ffeil personol

**Special requirements (care sector)**

Because this position involves the care of vulnerable adults employment is dependent on the following:

1) Your written consent to obtaining a Disclosure and barring certificate from the Disclosure and Barring Service or an approved umbrella body or provision of a PVG Scheme Record/Scheme Record Update.

2) Such disclosure being acceptable to us.

3) Proof of identity – birth or marriage certificate (where appropriate) and passport (if available).

4) Two satisfactory written references.

5) That you will supply a photograph of yourself for the retention in your records.

**Datganiad (Darllenwch hwn yn ofalus cyn arwyddo os gwelwch yn dda)**

1. Rwy’n cadarnhau bod y wybodaeth yn gynhwysfawr a chywir ac y byddai unrhyw wybodaeth anghywir neu gamarweiniol yn rhoddi hawl i’m cyflogwr ddileu y cytundeb gwaith a gyniwyd

2. Pe byddem angen unrhyw wybodaeth ychwanegol gan gysylltu ag meddyg ar gyfer adroddiad meddygol, mae’r gyfraith yn mynnu bod rhaid i ni eich hysbysu o’n bwriad a derbyn eich caniatâd cyn cysylltu a’r meddyg. Rwy’n cytuno bod gan y cwmni yr hawl i ofyn i mi ymgymryd ag archwiliad meddygol. Yn ogystal rwy’n cytuno y byddai’r wybodaeth hon yn cael ei gynnwys ar fy ffeil personol yn ystod fy nghyflogaeth a hyn at 6 mlynedd ar ôl iddo ddirwyn i ben. Caiff y wybodaeth ei brosesu i gydymffurfio a Deddf Diogeli Data.

3. Yr wyf hefyd yn cytuno os byddwn yn llwyddiannus yn y cais hwn, byddaf yn gwneud cais i'r Gwasanaeth Datgelu a Gwahardd am Tysgysgrif Ddatgeliad a Gwahardd. Rwyf yn deall os byddaf yn methu gwneud hynny, neu os na fydd y datgeliad neu'r cyfeirio yn foddhaol, gall unrhyw gynnig o gyflogaeth ei dynnu yn ôl neu fy nghyflogaeth i ben.

**Declaration (Please read this carefully before signing this application)**

1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.

2. Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor. I agree that the organisation reserves the right to require me to undergo a medical examination, In addition, I agree that this information will be retained in my personal file during employment and for up to six years thereafter and understand that information will be processed in accordance with Data Protection Act.

3. I will applyto the Disclosure and Barring Service for a Disclosure and Barring certificate. I understand that should I fail to do so, or should the disclosure or reference not be satisfactory, any offer of employment may be withdrawn or my employment terminated.

**Llofnod Signed:­­ Dyddiad Date:**