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| HR reference | 00000001345 / |

**Belfast City Council**

Application for appointment as:

**Innovation Challenge Fund Manager (Grants, Debts and Equities Fund) (PO8)**

**‘Temporary project’ post for three years, subject to review**

**(Applicants must be current Belfast City Council employees or agency assignees as at Wednesday 5 January 2022 and throughout the selection process)**

**City Innovation Unit**

**City and Organisational Strategy Department**

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| Name of Applicant: |  |
| Address: |  |
| The closing date for applications is **4pm on Wednesday 5 January 2022**  Completed application forms should be emailed to [jobs@belfastcity.gov.uk](mailto:jobs@belfastcity.gov.uk) and you will receive an automatic reply when your application has been received. If you don’t receive an acknowledgement within 30 minutes, please call 9027 0640 to confirm receipt (office hours are normally Mon-Thurs 8.30am-5pm, Fri 8.30am-4.30pm). You must confirm receipt **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, as part of our COVID HR Service Recovery Plan, we are unable to issue or receive any hard copy application forms, either by post or hand-delivered, at this time.** | |

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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 call 028 9027 0640** |
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| **Belfast City Council is an equal opportunities employer and we welcome applications from all sections of the community** |

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| **Section 1: Personal details** | | | | | | |
| Are you currently employed by or an agency assignee of Belfast City Council  **(If you only work within Belfast City Council on a casual basis please mark your answer as No [see below]**)? | | | Yes |  | No |  |
| Are you a current casual worker with Belfast City Council?  **(Please note:** casual workers are ineligible for this post.) | | | Yes |  | No |  |
| **1.** | **Your details** | | | | | |
| (a) | Title: (Mr, Mrs, Ms, Miss, Dr etc) |  | | | | |
|  |  |  | | | | |
| (b) | Forenames: |  | | | | |
|  |  |  | | | | |
| (c) | Preferred name: |  | | | | |
|  |  |  | | | | |
| (d) | Surname: |  | | | | |
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| **2.** | **Contact details** | | | | | |
| (a) | Work telephone number: |  | | | | |
|  |  |  | | | | |
| (b) | Mobile number: |  | | | | |
|  |  |  | | | | |
| (c) | Preferred contact number: |  | | | | |
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| (d) | Email address: |  | | | | |
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| (e) | Address 1: |  | | | | |
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| (f) | Address 2: |  | | | | |
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| (g) | Town: |  | | | | |
|  |  |  | | | | |
| (h) | County: |  | | | | |
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| (i) | Postcode: |  | | | | |
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| **3.** | **Other information** | | | | | |
|  | National insurance number: |  | | | | |
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| I certify that the information that I have supplied in this form is correct and I 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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| **Section 2: Qualifications and current position held** | | | | | |
| **4.** | **Qualifications** | | | | |
| (a) | Details of qualifications obtained (please refer to employee specification):  Please state name, level and grade of qualification, the year attained and the examining body or university/college which awarded your qualification as this information may be needed by the selection panel. | | | | |
|  | **If applicable, applicants must, as at the closing date for receipt of applications, have a third level qualification in a relevant subject such as Information Technology, Business or Public Administration, Engineering, or equivalent relevant qualification.**  **Please detail your relevant qualification below:** | | | | |
| Year: | | Examining body / University / College: | Level of qualification: | Subject: | Grade or mark: |
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| (b) | If you are applying for a post on the basis of a qualification which is not stated on the employee specification but which you consider to be equivalent, please list the main topics and modules below to demonstrate how you feel it is equivalent in terms of level, breadth, depth and content etc. Please also provide any further information which you feel supports your case.  (The selection panel will make the final decision on the relevance and equivalence of your qualification.) | | | |
|  |  | | | |
| Year: | Examining body / University/College: | Level of qualification: | Subject and modules studied: | Grade or mark |
|  |  |  |  |  |
| Any other support evidence as to the equivalence of the qualifications stated, for example, breadth of overlap with qualification as detailed in the employee specification: | | | | |
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| (c) | **Current position held:** | | |
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| Current Job Title: | | Grade: | Date appointed: |
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| **Section 3: Experience** | |
| **5.** |  |

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| **You must complete this form in either typescript (Arial font size 11) or legible hand-writing using black ink. You must limit your text in the next section to no more than one A4 page. You must not use continuation sheets. If you submit more than one page, 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:   * either, have a third level qualification in a relevant subject such as Information Technology, Business or Public Administration, Engineering, or equivalent relevant qualification **and** be able to demonstrate, by providing personal and specific examples on the application form, at least two years’ relevant experience in each of the following three areas; **or** * be able to demonstrate, by providing personal and specific examples on the application form, at least three years’ relevant experience in each of the following three areas:   1. designing or developing processes and procedures to support the delivery of funding programmes while ensuring high standards of financial administration and probity;   2. engaging with private and public sector stakeholders to develop or deliver programmes or schemes to support SME growth or the development of new innovation products; and   3. managing the delivery of significant and complex programmes or projects including the development and delivery of internal and external communications plans and promotional events.   **Short-listing criterion**  In addition to the above qualifications and, or experience, Belfast City Council reserves the right to short-list only those applicants who, as at the closing date for receipt of application forms:  d) can demonstrate, by providing personal and specific examples on their application form, that they have relevant experience of leading and delivering joint partnerships and consortia to develop funding bids or applications.  **In boxes (a) to (d) please provide the following detail:**  (a) 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 the processes and procedures you have designed and developed, the steps you have taken, how these processes and procedures supported the delivery of funding programmes, the steps you have taken to ensure high standards of financial administration and probity, etc.  (b) 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 the range of private and public sector stakeholders you have engaged with; the programmes or schemes that these stakeholders delivered from concept to delivery; how these programmes or schemes supported SME growth; how you ensured these partnerships and engagements were successful; what you achieved with these stakeholders, any challenges overcome, any outcomes, etc.  (c) 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 the significant programmes or projects you have managed the delivery of; the internal and external communications plans and promotional events that you have developed and delivered; the steps you have taken, any challenges overcome, any outcomes, etc.  (d) If applicable, you must clearly detail the joint partnerships and consortia that you led and delivered; the steps you took to lead and deliver them; the partners and organisations involved; the funding bids and applications developed, the purpose and amount of the funding, any outcomes, etc. |

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| **(a)** | Applicants **must** demonstrate here, by providing personal and specific examples, that they have at least either two years’ or three years’ relevant experience (as detailed in the Employee Specification) of designing or developing processes and procedures to support the delivery of funding programmes while ensuring high standards of financial administration and probity.  Continuation sheets must not be used |
| **(b)** | Applicants **must** demonstrate here, by providing personal and specific examples, that they have at least either two years’ or three years’ relevant experience (as detailed in the Employee Specification) of engaging with private and public sector stakeholders to develop or deliver programmes or schemes to support SME growth or the development of new innovation products.  Continuation sheets must not be used |
| **(c)** | Applicants **must** demonstrate here, by providing personal and specific examples, that they have at least either two years’ or three years’ relevant experience (as detailed in the Employee Specification) of managing the delivery of significant programmes or projects including the development and delivery of internal and external communication plans and promotional events.  Continuation sheets must not be used |

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| **(d)** | **Shortlisting criterion:** If applicable, applicants should demonstrate here, by providing personal and specific examples, that they have relevant experience of leading and delivering joint partnerships and consortia to develop funding bids or applications.  Continuation sheets must not be used |

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| **Equal opportunity monitoring form** | | |
|  | HR Reference number: | 0000001345 / |
| 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 |  |
| How do you define your gender? | | | | | | | | | | | |
| Male |  |  |  | Female |  |  | Prefer not to answer | |  | |  |  |  |
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| I use another term (for example, Intersex, non-binary), please specific: | | | | | | | | |  | |  |  |  |
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| **Do you consider yourself to be trans\* or transgender\*\*?** | | | | | | | | | | |  |  |  |
| Yes |  |  |  | No |  |  | Prefer not to say | |  | |  |  |  |
| *\** 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 |  |  | |  |  |  |  |  |  |  |  |
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|  | Cohabitant | | | |  | Same sex marriage | | |  |  |  |  |
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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 | | | | | |  |  |  |  |
|  | | | | | | | | | |  |  |
| If yes, please state nature of disability: | | | | | | | | |  |  | |
|  | | | | | | | | |  |  | |
|  | | | | | | | | | |  | |
| **If No, have you ever had a disability?** |  | Yes | |  | |  | No |  |  | History |  |
|  |  |  | |  | |  |  |  |  |  |  |
|  |  | 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. | | | | | | | | |  |  |  |
|  | | | | | | | | |  |  |  |
| 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 answer |  |  |  |  | |
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| 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 |  |  |  |  | |
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| **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 |  |  |  |  | |  | |