Expression of Interest

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **REFERRER NAME**  **Please include email address and organisation** |  | | | | | | | |
| **FOR REFERRERS ONLY: IF YOU HAVE A SAFEGUARDING CONCERN, PLEASE CONTACT US DIRECTLY DIRECTLYDIRECTLYDIRECTLY** | | | | | | | | |
| **First Name(s):** |  | | | **Surname:** | |  | | |
| **Age Bracket** | 16 - 18 19 - 24 25 - 49 50+ | | | | | | | |
| **Address & Postcode:** |  | | | | | | | |
| **Phone number:** |  | | | | | | | |
| **Email:** |  | | | | | | | |
| **Employment Status: please state unemployed / employed / self-employed / fixed term/part-time etc.** |  | **Unemployed 12 + months?** | Y | N | **Type of  Benefit &  Length of**  **Claim** | | |  |
| **Preferred Language/Contact** | English Welsh  Other: | | Phone call Text Email | | | | | |
| **Complete if additional numeracy support from Multiply is required** | Care leaver  Yes No | | Prison leaver  Yes No | | | | Highest numeracy qualification: | |
| **Details of support required:**  **Additional information to include**   * **details of last job or current employment;** * **qualifications gained;** * **barriers to work or training;** * **goals** * **driving status;** * **CV requirements** |  | | | | | | | |

**Declaration**

We are committed to protecting your personal information and complying with the General Data Protection Regulations (GDPR) & Data Protection Act 2018. We only ask for information we need to help provide you with up-to-date, impartial information, advice, and guidance.

**I have read the information above and understand why this information should be shared between the referring organisation and Employability Bridgend, and consent to being contacted for employability support.**

If, for any reason, I am not eligible for Employability Bridgend, I consent to my details being shared with the relevant

support agency.

|  |  |  |  |
| --- | --- | --- | --- |
| **Print Name** |  | **Signature** |  |
| **Date** |  |

[**Email: employability@bridgend.gov.uk**](mailto:Email:%20employability@bridgend.gov.uk)

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Ffurflen Datgan Diddordeb

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ENW’R ATGYFEIRIWR**  **Dylid cynnwys cyfeiriad e-bost a sefydliad** |  | | | | | | | |
| **AR GYFER ATGYFEIRWYR YR UNIG: OS OES GENNYCH CHI BRYDER DIOGELU, CYSYLLTWCH Â NI'N UNIONGYRCHOLN UNIONGYRCHOL** | | | | | | | | |
| **Enw(au) Cyntaf:** |  | | | **Cyfenw:** | |  | | |
| **Braced Oed:** | 16 - 18 19 - 24 25 - 49 50+ | | | | | | | |
| **Cyfeiriad & Cod Post:** |  | | | | | | | |
| **Rhif ffôn:** |  | | | | | | | |
| **E-bost:** |  | | | | | | | |
| **Statws Cyflogaeth:**  **nodwch di-waith / cyflogedig / hunangyflogedig / cyfnod penodol / rhan-amser ayyb** |  | **Yn ddi-waith 12 + mis?** | I | N | **Math o fudd-dal, hyd ar hawliad** | | |  |
| **Iaith ddewisol**  **/ Cyswllt** | Saesneg Cymraeg  Arall: | | Galwad ffôn Neges destun E-bost | | | | | |
| **Llenwch os oes angen cymorth rhifedd ychwanegol gan Lluosi** | Yn gadael gofal  Ydw Nac ydw   1. Nac ydw | | Yn gadael y carchar  Ydw Nac ydw | | | | Cymhwyster rhifedd uchaf: | |
| **Manylion y cymorth sydd ei angen:**   * **gwybodaeth ychwanegol i gynnwys;** * **manylion y swydd;** * **ddiwethaf neu gyflogaeth gyfredol;** * **cymwysterau a enillwyd;** * **rhwystrau i waith neu hyfforddiant;** * **nodau;** * **statws gyrru;** * **gofynion CV** |  | | | | | | | |

**Datganiad**

Rydym wedi ymrwymo i ddiogelu eich gwybodaeth bersonol ac rydym yn cydymffurfio â’r Rheoliad Cyffredinol ar Ddiogelu Data (GDPR) a Deddf Diogelu Data 2018. Byddwn ond yn gofyn am wybodaeth y mae ei hangen arnom er mwyn helpu i ddarparu’r wybodaeth, y cyngor a’r arweiniad diweddaraf i chi.

**Rwyf wedi darllen yr wybodaeth uchod ac rwy’n deall pam y dylid rhannu’r wybodaeth hon rhwng y sefydliad sy’n atgyfeirio ac o fewn Cyflogadwyedd Pen-y-bont ar Ogwr, ac rwy’n rhoi fy nghaniatâd i gael fy nghysylltu i gael cymorth cyflogadwyedd.**

Os, am unrhyw reswm, nad wyf yn gymwys ar gyfer Cyflogadwyedd Pen-y-bont ar Ogwr, rwy’n rhoi fy nghaniatâd i fy manylion gael eu rhannu â’r asiantaeth gymorth berthnasol

|  |  |  |  |
| --- | --- | --- | --- |
| **Enw wedi’i brintio** |  | **Llofnod** |  |
| **Dyddiad** |  |

**E-bost:** [**employability@bridgend.gov.uk**](mailto:employability@bridgend.gov.uk)

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