**CYNGOR CAERDYDD**

**CARDIFF COUNCIL**

**CAIS AM PENODI AELOD ANNIBYNNOL PWYLLGOR LLYWODRAETHU AC ARCHWILIO**

**APPLICATION FOR THE APPOINTMENT OF INDEPENDENT MEMBER GOVERNANCE AND AUDIT COMMITTEE**

Unigolion sy'n dymuno cael eu hystyried ar gyfer y swydd fel Aelod Annibynnol o'r Pwyllgor Llywodraethu ac Archwilio Cyngor Caerdydd gofynnir i ddarparu'r wybodaeth ganlynol a fydd yn cael ei thrin yn hollol gyfrinachol am ac pwrpas y broses dethol hwn yn unig. Mae croeso i chi defnyddio tudalennau parhad os ydych yn dymuno ymhelaethu ar eich cais.

Individuals who wish to be considered for the position of Independent Member of the Cardiff Council Governance and Audit Committee are requested to provide the following information which will be treated in the strictest confidence and for the purpose of this selection process only. Please feel free to use a separate continuation page if you wish to expand on your application.

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| **post details**  **MANYLION Y SWYDD** | |  |
| Post Title: | **INDEPENDENT MEMBER OF GOVERNANCE AND AUDIT COMMITTEE** |  |
| Teitl y Swydd: | **AELOD ANNIBYNNOL PWYLLGOR LLYWODRAETHU AC ARCHWILIO** |
| To be returned by: |  |
| Y ffurflen i’w dychwelyd erbyn: |  |

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| **PERSONAL**  **PERSONOL** |

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| Surname:  Cyfenw: | |  | | | | Initials:  Llythrennau Cyntaf: |  | |
| Address:  Cyferiad: | | | |  | | | | |
| Post code:  Cod Post: | | | | | | | | |
| E-mail:  E-bost: |  | | | | Home Telephone Number:  Rhif Ffôn Cartref: | | |  |
| Mobile Telephone Number:  Rhif Ffôn Symudol: | | |  | | Other Telephone Number:  Rhif Ffôn Arall: | | |  |
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| **SUMMARY OF EXPERIENCE**  **CRYNODEB O BROFIAD** |

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| Please enter details of your experience including career, public and voluntary work, together with the nature of your current or most recent occupation.  Rhowch fanylion o'ch profiad gan gynnwys gyrfa, cyhoeddus a gwaith gwirfoddol, ynghyd â natur eich galwedigaeth bresennol neu fwyaf diweddar. |
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| **RELEVANT EXPERTISE/ SKILLS**  **ARBENIGEDD PERTHNASOL / SGILIAU** |

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| With reference to the Person Specification or Role Profile, please outline any knowledge or expertise which you have in each of these areas.  Gan gyfeirio at y Fanyleb Person neu Proffil Rôl amlinellwch unrhyw wybodaeth neu arbenigedd sydd gennych ym mhob un o'r meysydd hyn. |
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| Why do you wish to be considered for appointment as Independent Member of the Governance and Audit Committee and what particular attributes do you believe you would bring to the role?  Pam yr ydych yn dymuno cael eich ystyried ar gyfer penodiad fel Aelod Annibynnol o Pwyllgor Llywodraethu ac Archwilio a pha briodoleddau penodol ydych chi'n credu y byddech yn ei gynnig i'r rôl? |
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| **SUPPORTING INFORMATION**  **GWYBODAETH GEFNOGOL** |
| Please provide any additional information you may wish to give in support of your application.  Rhowch unrhyw wybodaeth ychwanegol yr hoffech eu rhoi i gefnogi eich cais. |
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| REFERENCESGEIRDAON |

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| Please provide details of two referees.  Please note that references are not accepted from relatives or friends.  Rhowch fanylion dau ganolwr  Sylwch na fyddwn yn derbyn geirdaon gan berthnasau na chyfeillion. | | |
|  | **Reference 1/Geirda 1:** | **Reference 2/Geirda 2:** |
| Name:  Enw: |  |  |
| Employers Name:  Enw’r Cyflogwr: |  |  |
| No, House Name:  Rhif, Enw’r Tŷ: |  |  |
| Street:  Stryd: |  |  |
| District:  Ardal: |  |  |
| Town, City:  Tref, Dinas: |  |  |
| Post Code:  Cod Post: |  |  |
| E-mail:  E-bost: |  |  |
| Position:  Swydd: |  |  |
| Telephone Number:  Rhif Ffôn: |  |  |
| Please state your relationship to the referee:  Nodwch eich perthynas â’r canolwr: |  |  |

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| **GENERAL**  **CYFFREDINOL** |

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| Please give any dates in the near future when you will not be available for interview. No guarantee is given that interviews will be rescheduled to accommodate your non availability.  Rhowch unrhyw ddyddiadau yn y dyfodol agos pan na fyddwch ar gael am gyfweliad. Ni allwn sicrhau y caiff cyfweliadau eu haildrefnu er hwylustod i chi. |  |
| Where did you find out about this vacancy?  Sut y clywsoch chi am y swydd wag hon? |  |
| Please confirm that you are not related to any Councillor or Senior Officer of the Council.  Cadarnhewch nad ydych yn perthyn i unrhyw Gynghorydd neu Uwch Swyddog o'r Cyngor. | Yes / No  Ydw / Nac Ydw |
| Do you have any business or other interests including membership or affiliation of any political or other organisation which would cause real or observed conflict with the duties and responsibilities of this role?  Oes gennych chi unrhyw fuddiannau busnes neu fuddiannau eraill gan gynnwys aelodaeth neu aelodaeth gyswllt o unrhyw fudiad gwleidyddol neu o fath arall a allai achosi gwrthdaro gwirioneddol neu ymddangosiadol gyda dyletswyddau’r rôl yma? | Yes / No  Oes / Nac Oes |

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| **CRIMINAL OFFENCES**  **TROSEDDAU** |

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| The Rehabilitation of Offenders Act 1974 makes it illegal for employers to discriminate against ex-offenders on the grounds of “spent” convictions. These are where the person convicted of a criminal offence has completed an appropriate period of rehabilitation. Note: You are not required to give any information on 'spent' convictions under the Rehabilitation of Offenders Act 1974.  Mae Deddf Adsefydlu Troseddwyr 1974 yn ei gwneud yn anghyfreithlon i gyflogwyr wahaniaethu yn erbyn cyn-droseddwyr ar sail collfarnau sydd "wedi darfod". Mae hyn pan fydd person sydd wedi’i gael yn euog o drosedd wedi cwblhau cyfnod adsefydlu priodol. Sylwer: Nid oes yn rhaid i chi roi gwybodaeth am gollfarnau sydd “wedi darfod” dan Ddeddf Ailsefydlu Troseddwyr 1974. | |
| Have you been convicted of any criminal offence? (including driving offences):  Ydych chi wedi'ch dyfarnu’n euog o unrhyw drosedd? (gan gynnwys troseddau gyrru): | Yes / No  Ydw / Nac ydw |
| If yes, please give details including the nature of the offence(s) and the date(s):  Os ydych chi, rhowch fanylion gan gynnwys natur y trosedd(au) a’r dyddiad(au): | |

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| **DISABILITY**  **ANABLEDD** |

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| The County Council wishes to give every encouragement to disabled job applicants and will offer an interview to all disabled candidates who meet the essential requirements of the person specification/role profile. If you are invited to interview we will ask you if you require any particular arrangements to be made, for example an accessible venue or a sign language interpreter.  Mae'r Cyngor Sir yn dymuno rhoi pob anogaeth i ymgeiswyr anabl a chynigir cyfweliad i bob ymgeisydd anabl sy'n ateb gofynion hanfodol y fanyleb person/proffil rol. Os gwahoddir chi am gyfweliad, byddwn yn gofyn a oes angen gwneud unrhyw drefniadau arbennig, er enghraifft sicrhau lleoliad hawdd mynd iddo neu ddehonglydd iaith arwyddion. |
| Do you identify as a disabled person? Yes / No  Ydych chi’n ystyried eich hun yn berson anabl? Ydw / Nac ydw |

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| **DATA PROTECTION ACT 1998**  **DEDDF DIOGELU DATA 1998** |

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| Any data supplied by you on this form will be processed in accordance with Data Protection Act requirements and in supplying it you consent to the Council processing the data for the purpose for which it is supplied. All personal information provided will be treated in the strictest confidence and will only be used by the Council or disclosed to others for a purpose permitted by law.  Bydd unrhyw ddata a roddwch ar y ffurflen hon yn cael ei brosesu yn unol â gofynion y Ddeddf Diogelu Data, ac wrth ei roi rydych chi'n cytuno i'r Cyngor brosesu'r data at y diben y'i rhoddwyd. Bydd pob gwybodaeth bersonol a roddir yn cael ei thrin yn gwbl gyfrinachol ac ond yn cael ei defnyddio gan y Cyngor neu ei datgelu i eraill at ddiben a ganiateir gan y gyfraith yn unig. |

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| **DECLARATION**  **DATGANIAD** |

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| I certify that to the best of my knowledge, the information given on this form is correct and true. I understand that my application may be rejected or that I may be dismissed for withholding relevant details or giving false information. I also understand that the information I have provided may be subject to checking. I have not canvassed an Elected Member/employee of the Council, either directly or indirectly, in connection with this application and I will not do so.  Rwy’n cadarnhau, hyd y gwn i, bod y wybodaeth a roddwyd ar y ffurflen hon yn wir ac yn gywir. Rwy’n deall y gellid gwrthod fy nghais neu fy niswyddo am beidio â datgelu manylion perthnasol neu am roi gwybodaeth ffug. Rwyf hefyd yn deall y gellir gwirio’r wybodaeth rwyf wedi’i rhoi. Nid wyf wedi canfasio unrhyw Aelod Etholedig na staff y Cyngor, boed yn uniongyrchol neu’n anuniongyrchol, mewn perthynas â’r cais hwn ac ni fyddaf yn gwneud hynny. | | |
| Signature:  Llofnod: | | Date:  Dyddiad: |
| This form should be returned clearly marked  **PRIVATE APPLICATION FOR INDEPENDENT MEMBER GOVERNANCE AND AUDIT COMMITTEE** to:  **Committee & Member Services**  **Cardiff Council**  **Room 286**  **County Hall**  **Atlantic Wharf**  **Cardiff CF10 4UW**  Or by email to  [democraticservices@cardiff.gov.uk](mailto:democraticservices@cardiff.gov.uk) | **Dylid dychwelyd y ffurflen hon wedi marcio'n glir**  **PREIFAT CAIS AM PENODI AELOD ANNIBYNNOL PWYLLGOR LLYWODRAETHU AC ARCHWILIO i:**  **Gwasanaethau Pwyllgorau a Aelodau**  **Cyngor Caerdydd**  **Ystafell 286**  **Neuadd y Sir,**  **Glanfa Iwerydd**  **Caerdydd CF10 4UW**  Neu trwy Ebost i  [gwasanaethaudemocrataidd@caerdydd.gov.uk](mailto:gwasanaethaudemocrataidd@caerdydd.gov.uk) | |

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**EQUAL OPPORTUNITY POLICY POLISI CYFLE CYFARTAL**

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| In order to ensure the Council's continued development of its declared Equal Opportunity Policy Statement and to provide other essential information if you are appointed, you are asked to provide the following information by ticking the appropriate boxes and completing the details requested. The information will be treated as confidential and will not be used in the selection process.  Er mwyn parhau i ddatblygu Datganiad Polisi Cyfle Cyfartal y Cyngor ac er mwyn rhoi gwybodaeth hanfodol os cewch eich penodi, gofynnir i chi roi’r wybodaeth ganlynol drwy dicio’r blychau priodol a thrwy lenwi’r manylion y gofynnir amdanynt. Caiff y wybodaeth ei thrin yn gyfrinachol ac ni chaiff ei defnyddio yn ystod y broses ddethol. | | | | |
| Surname:  Cyfenw: |  | | First Name:  Enw Cyntaf: |  |
| Middle Name:  Enw Canol: |  | | Date of Birth:  Dyddiad Geni: |  |
| How do you wish to be addressed? Mr, Mrs, Miss, Ms, Other. Please specify:  Beth yw eich dewis o ran teitl? Mr, Mrs, Miss, Ms, Arall. Nodwch: | | | |  |
| National Insurance No:  Rhif Yswiriant Gwladol: | |  | | |

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| **NATIONALITY**  **CENEDLIGRWYDD** |

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| Please state your Nationality  Nodwch eich Cenedligrwydd |  |

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| **ETHNIC ORIGIN**  **TARDDIAD ETHNIG** |

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| Please tick one box only.  Ticiwch un blwch yn unig. | |
| **WHITE/GWYN**  British/Prydeining  Welsh/Cymreig  Scottish/Albanaidd  Irish/Gwyddelig  Northern Irish / O Ogledd Iwerddon  English/Seisnig  Gypsy or Irish Traveller /  Sipsi neu Deithiwr Gwyddelig  Other/Arall  If Other, please specify:  Os Arall, nodwch:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BLACK/DU British/Prydeinig  African/Affricanaidd  Caribbean/Caribïaidd  Other/Arall  If Other, please specify:  Os Arall, nodwch:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **ASIAN/ASIAIDD**  British/Prydeinig  Bangladeshi/Bangladeshi  Indian/Indiaidd  Pakistani/Pacistanaidd  Other/Arall  If Other, please specify:  Os Arall, nodwch:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | CHINESE OR OTHER FAR EASTERN/TSIEINEAIDD NEU DDWYRAIN PELL ARALL British/Prydeinig  Chinese/Tsieineaidd  Other/Arall  If Other, please specify:  Os Arall, nodwch:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **MIXED RACE/HIL GYMYSG**  White and Black Caribbean/  Gwyn/Du Caribïaidd  White and Black African/  Gwyn/Du Affricanaidd  White and Asian/  Gwyn/Asiaidd  Other/Arall  If Other, please specify:  Os Arall, nodwch:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Any Other background, not already listed/**  **Unrhyw gefndir arall, nad yw wedi’i restru**  Arab / Arabaidd  Other/Arall  If Other, please specify:  Os Arall, nodwch:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **SEXUAL ORIENTATION**  **CYFEIRIADEDD RHYWIOL** |

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| Bisexual/Deurywiol  Heterosexual/Heterorywiol  Other/Arall | Gay/Hoyw  Lesbian/Lesbaidd  Prefer not to say/Ddim am ddweud |

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| **GENDER**  **RHYW** |

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| Female/Menyw | Male/Gwryw |
| Is your gender identity the same as the gender you were assigned at birth?  A yw eich hunaniaeth rhyw yr un fath â’r rhyw a aseiniwyd i chi ar eich genedigaeth? | Yes / No / Prefer not to say  Oes / Nac Oes / Ddim am ddweud |

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| **RELIGIOUS BELIEF / NON-BELIEF**  **CRED CREFYDDOL / DIFFYG CRED** |

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| Baha’i/Bahaiaidd  Christian/Cristnogol  Jain/Jainaeth  Muslim/Moslemaidd  Sikh/Sicaidd  None/Dim  Prefer not to say/Ddim am ddweud | Buddhist/Bwdhaidd  Hindu/Hindŵaidd  Jewish/Iddewig  Rastafarian/Rastaffaraidd  Zoroastrian/Zoroastiaidd  Other/Arall |

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| **DISABILITY**  **ANABLEDD** |

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| Identifying as a disabled person can include people with hearing or sight impairments, people with mental health difficulties or learning disabilities, people with mobility impairments, or those who have long-term health conditions, for example: depression, diabetes, asthma, multiple sclerosis, HIV or cancer.  Mae’r diffiniad o berson anabl yn cynnwys pobl â namau ar y clyw ac ar y golwg, pobl ag anawsterau iechyd meddwl neu anableddau dysgu, pobl â namau symudedd, neu’r rheiny â chyflwr iechyd hir dymor, er enghraifft: iselder, clefyd y siwgr, asthma, parlys ymledol, HIV neu ganser | |
| Do you identify as a disabled person?  Ydych chi’n ystyried eich hun yn berson anabl? | Yes / No  Ydw / Nac ydw |

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| **LANGUAGE SKILLS**  **SGILIAU LAITH** |

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| Do you speak, read, understand or write in Welsh?  Ydych chi'n gallu siarad, darllen, deall neu ysgrifennu Cymraeg? | | Yes / No  Ydw / Nac ydw |
| Do you speak, read, understand or write in any other language (except English)?  Ydych chi’n gallu siarad, darllen, deall neu ysgrifennu unrhyw iaith arall (ar wahân i Saesneg)? | | Yes / No  Ydw / Nac ydw |
| If yes please specify Language:  Os ydych, nodwch pa Iaith: |  | |