SAVE0025

**in-work enterprises ltd**

**Employment Application**

All information supplied by applicants will be treated as confidential.

|  |  |
| --- | --- |
| Position applied for: |  |

|  |  |
| --- | --- |
| From which source did you become aware of this vacancy? |  |

**PERSONAL INFORMATION**

|  |
| --- |
| Surname Title |
| Forename(s) |
| Address |
|  |
|  |
| If you are a foreign national, do you have a work permit? |
| Telephone no. (daytime if possible) |
| National Insurance No. |
| If it is an option, would you wish to job share? |

SAVE0025

**in-work enterprises ltd**

**Employment Application**

**Private & Confidential**

All sections of this application form **must be completed**. Additional information may be attached on extra sheets if necessary.

|  |  |
| --- | --- |
| Post Title |  |

**FORMAL EDUCATION** (From Secondary School onwards)

Please include details of all formal education including School, College & University

|  |  |  |
| --- | --- | --- |
| School, College, University | Dates  From / To | Qualification & Grades (where appropriate) |
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**TRAINING**

Please include brief details of relevant training

|  |  |  |
| --- | --- | --- |
| Provider | Dates  From / To | Course Title |
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**PROFESSIONAL MEMBERSHIP/S**

|  |  |  |  |
| --- | --- | --- | --- |
| Professional Body/  Membership | Status of membership | Date obtained/elected | Reg Number |
|  |  |  |  |

**EMPLOYMENT HISTORY**

**CURRENT / MOST RECENT POST**

|  |  |
| --- | --- |
| Post held |  |
| Name & Address of Employer |  |
| Dates (from/to) |  |
| Present Salary |  |
| Notice required or reason for leaving |  |

|  |
| --- |
| Please describe your main duties & responsibilities. (Continue on next page if necessary) |

**PREVIOUS EMPLOYMENT**

List in order with most recent employer first

|  |  |
| --- | --- |
| Dates | Name & Address of Employer |
| From-  To- |  |
| Job title | |
| Salary | |
| Describe main duties and responsibilities | |
| Reason for leaving | |

**PREVIOUS EMPLOYMENT**

List in order with most recent employer first

|  |  |
| --- | --- |
| Dates | Name & Address of Employer |
| From-  To- |  |
| Job title | |
| Salary | |
| Describe main duties and responsibilities | |
| Reason for Leaving | |

**PREVIOUS EMPLOYMENT**

List in order with most recent employer first

|  |  |
| --- | --- |
| Dates | Name & Address of Employer |
| From-  To- |  |
| Job title | |
| Salary | |
| Describe main duties and responsibilities | |
| Reason for leaving | |

**PREVIOUS EMPLOYMENT**

List in order with most recent employer first

|  |  |
| --- | --- |
| Dates | Name & Address of Employer |
| From-  To- |  |
| Job title | |
| Salary | |
| Describe main duties and responsibilities | |
| Reason for Leaving | |

**STATEMENT IN SUPPORT OF APPLICATION**

Please describe your reasons for applying for this post and demonstrate how your experience, skills and training, at work or in a personal/voluntary capacity, relate to it.

|  |
| --- |
|  |

**The Disability Discrimination Act 1995 defines Disability as “Any physical or mental impairment which has a substantial adverse effect on a person’s ability to carry out normal day to day activities”**

**All candidates who indicate they have a disability and meet the criteria for the post will be interviewed.**

**Do you have a physical or mental health condition, disability or other factor that might affect your ability to undertake this post?**

**□ Yes □ No**

If yes, please give details

|  |
| --- |
|  |

Please specify any special requirements you require if attending for interview.

|  |
| --- |
|  |

**HEALTH STATUS**

**Please list all absences from work through illness or injury over the last two years.**

**Number of Days Reason for Absence Dates**

**Absent From To**

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**REFEREES**

Names and addresses of two people, one of whom should be your present/most

recent employer, who may be contacted for a reference.

|  |
| --- |
| Name (1)  Position  Address  Tel No:  May contact be made prior to interview? YES NO  In what capacity does this referee know you? |
| Name (2)  Position  Address  Tel No:  May contact be made prior to interview? YES NO  In what capacity does this referee know you? |

**DECLARATION (please read carefully before signing)**

|  |
| --- |
| I certify that all information contained in this application is true and correct to the best of my knowledge. I realise that false information or omissions may lead to dismissal without notice.  Signature Date |

**RECRUITMENT OF EX-OFFENDERS**

**REHABILITATION OF OFFENDERS ACT 1974**

**(EXCEPTIONS) ORDER 1975**

The post for which you are applying is included in the excepted type of employment under the above act.

We are legally entitled to ask applicants that all previous convictions must be declared. You must not withhold information about convictions which for other purposes are “Spent”.

If you are offered employment, any failure to disclose such convictions could result in dismissal or disciplinary action.

**I declare that I have:**

(a) No previous convictions □

(b) Previous convictions – details of which I give below □

(c) I have criminal charges pending – details of which I give below □

(This information will be verified by Disclosure Scotland)

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Signature ……………………………………. Date …………………….

Print Name …………………………………..

**CONFIDENTIAL EQUAL OPPORTUNITIES**

**MONITORING FORM**

**In-work enterprises** are committed to pursuing equality of opportunity within the principle of appointment based on merit and want to ensure that job opportunities are open to all. Monitoring applications is one way of helping ensure that there is no discrimination in the way that people are selected. Therefore this form asks you for your ethnic origin, gender, disability, religion, sexuality and age, these will only be used for monitoring purposes only. The information you provide will be confidential and will not influence your application in any way.

|  |
| --- |
| Name |
| Post applied for |
| Date of Birth |
| Age  **16-20□ 21-24□ 25-34□ 35-44□ 45-5□ 55 +□** |
| Gender **Male□ Female □ Other □** |
| Marital Status **Married□ Not Married□** |
| Ethnic Origin **White□ Black African□ Black Caribbean □**  **Chinese□ Indian□ Pakistani □**  **Bangladeshi □** |

**Do you consider yourself to be disabled? □**

**Are you registered disabled? □**