

**THE ABBEYFIELD PERTH SOCIETY LTD.
APPLICATION FORM FOR EMPLOYMENT**



PERSONAL DETAILS

POST APPLIED FOR

SURNAME..... INITIALS.....

ADDRESS.....

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POSTCODE..... TEL NO.....

EMAIL

NATIONAL INSURANCE NUMBER

SUPPORTING STATEMENT

Please give your reasons for applying, stating why you feel you are suited and what skills, knowledge and experience you would bring to the post. Please refer closely to the Job Description and ensure that you could provide evidence that you meet the criteria. Please note it is our policy that Care Staff must be age 18+.

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I understand that any appointment will be made after assessment of referees and interview, and be subject to membership of the PVG (Protection of Vulnerable Group) Scheme. There will be a six-month probationary period. No reason need be given for non-appointment.

SIGNED..... Date.....

Please return your completed application form and any enclosures to :-
The Manager
The Abbeyfield Perth Society
Viewlands House
25 Viewlands Road
Perth, PH1 1BL.

EMPLOYMENT HISTORY

Current / Most recent Employers Name & Address	Position held & Main Duties	Date Started	Date Finished	Reason for Leaving
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Current Salary Notice Required

PLEASE GIVE DETAILS OF EMPLOYMENT HISTORY FOR THE PAST 10 YEARS, IN SEQUENCE WITH MOST RECENT FIRST. Continue on a separate sheet if necessary.

Previous Employers Name & Address	Position held & Main Duties	Date Started	Date Finished	Reason for Leaving
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EDUCATION & TRAINING

Please give details of any courses/ training, vocational or professional qualifications. Also give details of all Further and Higher Education since leaving school (SVQ's)

Course title and School/College attended	Qualification or result	Course duration and when achieved

REGISTRATION DETAILS

Please enter details of registrations already held:

PVG membership number

SSSC membership number

NMC PIN

REFERENCES

REFEREES: One of your referees must be your present, or most recent employer.

NAME..... NAME.....

JOB TITLE JOB TITLE

ADDRESS ADDRESS.....

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POSTCODE..... POSTCODE.....

TEL No TEL No

May we contact prior to interview YES / NO May we contact prior to interview YES / NO

Please state from which source you first became aware of this vacancy

Criminal Conviction Declaration Form for Applicants

Applicants for employment are required to disclose any previous ‘unspent’ criminal convictions and any cautions which have not expired, or any pending prosecutions. In addition, this role requires you to disclose all spent convictions and cautions **except** those which are ‘protected’ under Protection of Vulnerable Groups (Scotland) Act 2007. These are not subject to disclosure to employers on PVG certificates and cannot be taken into account. Guidance on the filtering of “protected” cautions and convictions which do not need to be disclosed by a job applicant can be found on the Disclosure and Barring Service website.

Disclosure of a conviction, caution, warning or reprimand will not automatically disqualify you from consideration. Any offence will only be taken into consideration if it is one which would make you unsuitable for the type of work you are applying for. However, offences relating to children/vulnerable adults are likely to make you unsuitable since this is a ‘regulated position’ given that your role would be working with vulnerable adults.

This form should be completed and returned at the application stage and the nature of the offences will be examined and a risk assessment and decision will then be made as to the relevance of the offence. If an interview is granted, please expect questions relating to the relevance or concerns that the business may have that are relevant to the position.

Name :	
Post applied for:	

Disqualification

Are you disqualified from working with vulnerable adults?

Spent and Unspent Convictions, Cautions, Warnings and Reprimands except those “protected”

Have you ever been convicted of a criminal offence, charged with an offence that is relevant to disclose for this position working with vulnerable adults, or are you at present, the subject of criminal charges? If **yes**, please provide the following details:

Date(s) of conviction(s) and/or charge(s)	
Outcome of conviction(s) and/or charge(s)	
Please provide relevant details of the nature of the conviction(s)/charge(s) What have you learned from the above incident(s)	

Please complete the above table entering “none” if not applicable.

Any appointment to post thereafter would however, still be subject to a satisfactory PVG certificate being issued by Disclosure Scotland.

If you are unsuccessful for the post following your interview the self-disclosure form will be destroyed. If you are successful for interview you should ensure that you provide 1 form of photographic identification and 1 form of address verification and also any other form of identification.

I certify that I have read and understood this form, and the information I have entered is true and complete. I understand that if I have failed to disclose or given false information then it may result in dismissal or, in the case of applying for a post, it will disqualify any offer of employment.

Signature:

Date:

EQUAL OPPORTUNITIES MONITORING FORM

The company is an equal opportunities employer. In order to ensure that equal opportunities are monitored effectively we have set up a system of monitoring all job applications. We would therefore be grateful if you would complete the questions on this form. All information will be treated in confidence and will not be seen by anyone directly involved in the selection process. The questionnaire will be stored separately from your application form, and used only for monitoring purposes.

Post applied for:	
Where did you see this post advertised:	

Age			
Please specify your age:		Prefer not to say	

Disability			
Under the Equality Act 2010 a disability is defined as physical or mental impairment which has, a substantial and long-term adverse effect on a person's ability to carry out normal day to day activities.			
Are you disabled?			
Yes		No	Prefer not to say
Please indicate on the application form, if one is provided for this post, or separately, details of any special needs you may have in taking up the post for which you are applying.			

Gender Reassignment			
Are you proposing to undergo, currently undergoing or have undergone gender reassignment surgery?			
Yes		No	Prefer not to say

Married or Civil Partnership Status			
Are you			
Married?		Not married?	Prefer not to say
('Married' includes civil partnership status. 'Not married' includes single, widowed and divorced)			

Race			
Please specify your nationality and ethnic origin:		Prefer not to say	

Religion or belief			
Please specify your religion or any other similar philosophical belief :		Prefer not to say	

Sex			
Male		Female	Prefer not to say

Sexual Orientation			
Please specify your sexual orientation:		Prefer not to say	

This is sensitive personal data and will be treated with the utmost confidentiality in line with the requirements of the Data protection Act.

Office use only

Shortlisted		Interviewed	Appointed
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(May 2019)