

Greenock Medical Aid Society

Employment Application

**Please complete the following and return to** **admin@gmas.care** **or**

**Admin, Greenock Medical Aid Society, Bagatelle, 47 Eldon Street, Greenock, PA16 7RA**

|  |  |
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| **Application for the post of**  |  |
| **Home**  | **Bagatelle / Glenfield** |
|  |
| **Name of Applicant**  |  |
| **Address** |  |
|  |  |
| **Town** |  |
| **Postcode**  |  |
| **Contact Number**  |  |
| **Email**  |  |
| **Known by any other name?** | **Yes / No** |
| **(If yes please provide details)**  |
|  |
| **NI Number** |  |
| **NMC Pin Number**  |  **Expiry Date:** |
| **SSSC Number**  |  **Expiry Date:** |
| **PVG Mem No** |  |
| **(A PVG Disclosure will be required due to the nature of the work you will doing)** |
|  |
| **In a few words describe why you consider you are suitable for this post.**  |
| **Employment History (Please provide your employment history (up to 10 years), starting with your most recent employer, also provide details / reasons for any gaps in employment).** |
| **Current Employer** |  |
| **Position Held** |  |
| **Start Date**  |  |
| **Employer Address** |  |
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|  |  |
| **Duties**  |
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|  |
| **Reason for leaving** |  |
|  |
| **Previous Employer** |  |
| **Position Held** |  |
| **Start Date**  |  |
| **Duties**  |
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|  |
| **End Date**  |  |
| **Reason for leaving** |  |

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| --- | --- |
| **Previous Employer** |  |
| **Position Held** |  |
| **Start Date**  |  |
| **Duties**  |
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| **End Date**  |  |
| **Reason for leaving** |  |

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| --- | --- |
| **Previous Employer** |  |
| **Position Held** |  |
| **Start Date**  |  |
| **Duties**  |
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| **End Date**  |  |
| **Reason for leaving** |  |

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| **Gaps in employment:** |

**Please continue on a separate sheet of paper if necessary.**

**Education / Qualifications**

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| **School / College Attended** | **Qualifications** |
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| **University Attended** | **Professional Qualifications** |
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| **Other Courses / Training** | **Qualifications** |
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**References**

We are required to obtain references in support of your application.

An **Employers Reference** will be obtained from your current employer, if you are not currently employed, your most recent employer can be used. A **Character Reference** will also be obtained and must be from a person you know in a professional capacity who has known you for at least 2 years.

**References will not be obtained prior to an offer of employment being made.**

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| **Employers Reference (Business Address only)** |
| **Name** |  |
| **Position** |  |
| **Address** |  |
|  |  |
|  |  |
| **Postcode** |  |
| **Tel** |  |
| **Email** |  |
| **Character Reference**  |
| **Name** |  |
| **Relationship** |  |
| **Address** |  |
|  |  |
|  |  |
| **Postcode**  |  |
| **Tel** |  |
| **Email** |  |

**Rehabilitation of Offenders Act 1974** (Exceptions) Order 1975:

**Details of any convictions must be given**. Because of the nature of the work for which you are applying, this post is excepted from the provision of section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are “spent” under the provisions of the Act, and in the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action by the Society. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the Order applies.

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| **Details of Offence:** |
| **Date of Offence**  |  |

**Privacy Notice**

Greenock Medical Aid Society (GMAS) is committed to protecting the privacy and security of your personal information. We will only use your information in accordance with your Application for Employment. If you are successful in your Application for Employment then our full Privacy Notice for Employees will be provided to you. If you are unsuccessful, by law, we are required to hold your application for a six month period, after which it will be destroyed. If you would like a copy of the full Privacy Notice for Candidates for Employment please contact our Admin department.

**I confirm the information I have provided is accurate and true to the best of my knowledge.**

**Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**