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| C:\Users\Laura\Documents\Publicity and publications\New Logo (2).JPG | | | | | | **CONFIDENTIAL**  **APPLICATION FORM** | | | | |
| Please complete this form and return it to either the postal or email address shown below. | | | | | | | | | | |
| Application for the post of: (please specify) | | | | | | Please return form to:  Link Up Women’s Support Centre  St Margaret’s House, G1  151 London Road  Edinburgh  EH7 6AE  Email: info@link-upsupport.co.uk | | | | |
| **1. PERSONAL INFORMATION** | | | | | | | | | | |
| Last Name: First Name(s): | | | | | | | | | | |
| Home address: | | | | | | Telephone No:  Work Telephone No:  May we telephone you at work?  E-mail Address: | | | | |
| **2. QUALIFICATION AND TRAINING** | | | | | | | | | | |
| *Please list below all the qualifications you have or training courses you have attended, which are relevant to this post. Please give dates and grades and state whether the course was full or part time.* | | | | | | | | | | |
| **3. EMPLOYMENT HISTORY** | | | | | | | |
| **Note**: Please give details of all posts you have held, **starting** with your current or most recent post. | | | | | | | |
| From | To | Employer's Name, Address and Nature of Business | Job Title and Description of Duties. **Please Indicate Reason(s) for Leaving**. | | | | Final Salary /Grade |
|  |  |  |  | | | |  |
| **4. EXPERIENCE, SKILLS AND QUALITIES** | | | | | | | | | |
| *Please tell us why you are applying for this post and detail how your experience, skills and qualities equip you to fulfil the role duties and to meet the requirements detailed in the person specification.* | | | | | | | | | |
| **5. OTHER RELEVANT INFORMATION** | | | | | | | | | |
| *Please use this space to provide any other information you consider relevant to your application* | | | | | | | | | |
| **6. REFERENCES** | | | | | | | | | |
| Please give the names and addresses of two people whom we may contact for a confidential assessment of your suitability for this job. One of these should be your most recent or current employer. | | | | | | | | | |
| Name, Address, Tel No and Email Address  Can we take up this reference prior to interview? | | | | Name, Address, Tel No and Email Address  Can we take up this reference prior to interview? | | | | |
| **7. SOURCE** | | | | **8. IF APPOINTED** | | | | | |
| Where did you find out about this vacancy? | | | | When could you take up duties? | | | | | |
| **9. Rehabilitation of Offenders Act** | | | | | | | | | |
| PVG will be required for this role. Under the provisions of the Act do you wish to bring to the attention of the interview panel any conviction, whether spent or unspent? YES / NO Details: | | | | | | | | | |
| **10. DECLARATION** | | | | | | | | | |
| I confirm that the information I have given on this form is correct and complete and that misleading statements may be sufficient grounds for cancelling any agreements made.  I consent to the above data being held and processed for the sole purpose of recruitment and selection and being retained for a period of 6 months should my application be unsuccessful. | | | | | | | | | |
| **SIGNED:** | | | | | **DATE:** | | | | |

**Return completed application form (not a CV) to:**

**Link Up Women’s Support Centre**

**G1, 151 London Rd**

**Edinburgh**

**EH7 6AE**

Or by email to [info@link-upsupport.co.uk](mailto:info@link-upsupport.co.uk)