**Phone: 0141 258 2773 (not during Covid)**

**Mobile: 07718 896 041**

|  |
| --- |
| **Application for the post of:**  **Wellbeing Coordinator** |
| **Please return application by: Wednesday 19 May 2021 at 12 noon** |
| **Please return application by email to:** [info@infosource.org.uk](mailto:info@infosource.org.uk) |

**Job Application Form**

**IN CONFIDENCE**

# Please complete this form electronically

If there are problems with this, please contact us

to discuss ways of resolving it

*Office use*

**Application No:**

|  |  |  |
| --- | --- | --- |
| PERSONAL DETAILS | | |
| Ms / Mr | Names: | |
| Full Address: **Postcode:** | | |
| Home Telephone No: | | **Mobile Telephone No:** |
| Home E-mail: | | |

|  |
| --- |
| Illness |
| **If your application is successful, we may ask you to complete a health questionnaire.** |

|  |
| --- |
| **Please give details of any criminal convictions that are not "spent" as defined by the Rehabilitation of Offenders Act 1974.** |
|  |

|  |
| --- |
| Permission to work |
| Do you have permission to work in the UK? YES / NO |

(These two pages of the application form will not be given to panel members who are shortlisting)

**Application No:**

|  |  |
| --- | --- |
| EDUCATION AND TRAINING **Examinations / Qualifications (obtained at School, College, University, etc)** | |
| Qualification Subject & from Where | Results / Grades / Dates |
|  |  |

|  |  |
| --- | --- |
| OTHER TRAINING / WORK EXPERIENCE | |
| Subject and any qualification | Content, where & when obtained |
|  |  |

|  |  |  |
| --- | --- | --- |
| PRESENT OR MOST RECENT POST (may be voluntary) | | |
| **Name of Employer:** |  | |
| **Address or website:** |  | |
| **Telephone of employer:** |  | |
| **Title of post held:** |  | |
| **Full-time or part-time:** |  | |
| **Date appointed:** |  | |
| **Present Salary band (as 35 hours, over one year):** | **£** |  |

|  |
| --- |
| DUTIES OF PRESENT OR MOST RECENT POST |
| **Position:** Duties: |

|  |  |  |  |
| --- | --- | --- | --- |
| PREVIOUS EMPLOYMENTPlease begin with latest (excluding above) / supply exact dates where possible | | | |
| DatesFrom To | | **Name of Employer** | **Position held and brief details of duties** |
|  |  |  |  |

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| **STATEMENT IN SUPPORT OF APPLICATION**  **Please add here any information you wish to support your application, to say why you are suitable for this post. Please use a maximum of 200 words.**  **It is important that you show how you meet the skills required for the post**  **as listed in the Person Specification at the end of the Job Description** |
|  |

|  |
| --- |
| **Please give name, address and designation of two referees, one of whom *must* be your present or most recent employer / volunteering organisation.**  **We will not contact these referees without your permission.** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Name:** |  |
| **Organisation:** |  | **Organisation:** |  |
| **Designation of referee:** |  | **Designation of referee:** |  |
| **Address & postcode:** |  | **Address & postcode:** |  |
| **Telephone no:** |  | **Telephone no:** |  |
| **E-mail:** |  | **E-mail:** |  |

|  |
| --- |
| **Other Commitments** |
| Do you have any business commitment which makes demands upon your time or which have the potential to represent a conflict of interest with the job you are applying for? |
| If so, please give a brief description: |

|  |  |
| --- | --- |
| **Disclosure Scotland** | |
| **Would you have any problem with undertaking a Disclosure Scotland check?** | **Yes / No** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Disabilities | | | | |
| **Do you consider that you have a disability?** | **YES** |  | **NO** |  |
|  | | | | |
| If yes, are there any arrangements that we should make for you if you are called for interview? Please give details below. | | | | |
|  | | | | |

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| **Interview** |
| **Would you have a problem with attending for interview, on any day of week beginning Monday 31st May?** Would you be available during the day?  Please give details of any unsuitable times. |
|  |

|  |  |
| --- | --- |
| **I CERTIFY THAT THE INFORMATION GIVEN ON THE PREVIOUS PAGES IS CORRECT TO THE BEST OF MY KNOWLEDGE:** | |
| **Signature**: | **Date**: |

If you are successful in being appointed, we may ask you to sign a hard copy of the application form at that time (if there is no signature on the submitted application).

**EQUAL OPPORTUNITES MONITORING FORM**

**To help us monitor our equal opportunities policy and the effectiveness of our recruitment practices, we would like you to answer the following questions. This information will NOT be circulated to any shortlisting or interview panel. It will be detached from the application form on receipt.**

1. **Employment or volunteering post applied for:**

|  |
| --- |
| **Name of position: Wellbeing Coordinator** |

1. **Which project is the post for (if known)?**

|  |
| --- |
| **Wellbeing** |

1. **Where did you see the post advertised or hear about it?**

|  |
| --- |
|  |

1. **Are you: Male □ Female □** *(please tick the one that applies)*

**Other □**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Disability**

Do you consider yourself to be disabled? **Yes / No**

If “yes”, please give details of the condition and of any special needs you have:

If yes, is it: Physical □ Mental ill heath □

Learning disability □ Visual impairment □

Hearing impairment □ Trauma survivor □

Other: please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would you need any kind of support to allow you to take this position? **Yes / No**

If “yes”, please say what \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Immigration status**

**Do you have British citizenship? Yes / No**

**Do you have any refugee status?** **Yes / No**

If “yes”, what kind e.g. indefinite etc \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you an asylum seeker? Yes / No**

1. **Ethnic Origin**

**How would you describe your ethnic origin X which country**

|  |  |  |
| --- | --- | --- |
| Black, African. |  |  |
| Black, Caribbean |  |  |
| Black other: please say what |  |  |
| Asian: e.g. Afghani, Bangladeshi, Indian, Pakistani |  |  |
| Chinese |  |  |
| South east asian e.g. Vietnamese, Malaysian, Thai |  |  |
| Middle eastern e.g. Iran, Iraq, Kuwait, Palestine |  |  |
| East European countries (please say which) |  |  |
| White, Scottish |  |  |
| White, English |  |  |
| White, Irish |  |  |
| White other: please say what |  |  |
| Mixed parentage: please say what |  |  |
| Any other ethnic group: please say what |  |  |

1. **Which country (s) are you from?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Age**

Which of the following age bands do you belong to?

16 – 25 □ 41 – 50 □ 61 – 75 □

26 – 40 □ 51 – 60 □ Over 75 □

1. **Sexual Orientation**

How would you describe your sexual orientation?

Heterosexual □ Bi-sexual □ Gay □ Lesbian □

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THANK YOU FOR YOUR HELP IN MONITORING OUR SERVICE**