

# Application for Employment

# CVS Falkirk

The Third Sector Interface for Falkirk and District



Candidate Number:

Post Applied For:

## Important Notes

**We do NOT accept CVs. We do NOT accept faxed applications.**

Sections A - C and H (first and last page) will be detached from the rest of the application and that information will not be available to the shortlisting panel.

If the form is not completed and submitted online, please complete it in black ink using BLOCK CAPITALS.

**Returning your application.**

E-mailed applications should be sent to:

**recruitment@cvsfalkirk.org.uk**

## Section A: Contact Details

Forename(s)

Surname(s)

Address and postcode

Tel No. Home

Mobile No.

Tel No. Work (if convenient)

E-mail address:

## Section B: Health Information

Applications from disabled candidates are welcomed and the organisation will make every effort to ensure a fair selection process.

Please describe below any reasonable adjustments which you feel should be made to the recruitment process to assist your application for the job/attend for interview:

Please describe below any reasonable adjustments which you feel should be made to the job itself if you are successful, which would enable you to carry out the job duties:

## Section C: General Information

Are you currently eligible for employment in the UK?

*You will be required to provide proof of this before commencing employment.*

Yes

No

REHABILITATION OF OFFENDERS ACT 1974. If you have previously been convicted of any offences, please give details unless the conviction can be regarded as "spent" in terms of the Rehabilitation of Offenders Act 1974. If the position which you have applied for has been assessed as requiring PVG membership and/or a Disclosure check, this will also be carried out prior to employment verification. (Having a conviction will not necessarily discount you from being considered for the post.)





Candidate Number:

## Section E: Employment Record - continued

Previous Employment starting with the most recent. *(Please continue on additional sheet if necessary)*

Name and address of employer and nature of business	Dates		Post title and brief details of main duties	Reason for leaving
	From	To		

## Section F: Supporting Statement

Tell us how you match the person specification citing relevant and specific examples from your work and volunteer experience. Supply other relevant details in support of your application and describe the contribution you would make to the organisation. *(Please continue on a separate sheet(s) if necessary).*

## Section G: Storage of Sensitive Information, References and Declaration

If the person specification for the role applied for requires a driving licence:

Do you hold a full car driving licence? Yes  No  Do you have access to a car? Yes  No

### Storage of Sensitive Information

The personal information given on this form will be processed for the purpose of assessing your application for employment. It will be treated in confidence and will not be disclosed to any third parties where except permitted by law or where consent has been given. The information given is being gathered for consideration by CVS Falkirk and District.

CVS Falkirk and District is the Data Controller of this information and will store this Application Form in line with our Privacy Notice. The information gathered on the form will be retained for 1 year unless you instruct us otherwise.

I authorise the collection of this information by CVS Falkirk and District so that it may be used for the above purpose. It will be my responsibility if any information is incomplete or incorrect. I am aware that I am able to access, according to the Data Protection Act 1998, the information regarding my personal data that is kept by CVS Falkirk and District, by providing a written request. I can also request the correction, addition, or elimination of any data through this written request.

Signature

Date

### References

Please supply full details of two referees whom we may approach, one of whom should be your present or most recent employer and the other a previous employer. If you are self-employed or unemployed please give details of two people who have direct knowledge of your skills and abilities.

Name

Name

Organisation

Organisation

Address including postcode

Address including postcode

Telephone No

Telephone No

Can we contact before interview? Yes  No

Can we contact before interview? Yes  No

### Declaration

I declare that to the best of my knowledge and belief all particulars I have given in this and the accompanying pages of the application form are complete and true. I understand that any false or misleading statement or any significant omission could result in termination of employment should I be subsequently employed as a result of submitting this application.

I understand that any offer of employment will be subject to receipt of permission to work in the UK, satisfactory references, satisfactory Disclosure results (if applicable to the post being applied for) and a probationary period. I authorise CVS Falkirk and District to verify information contained in this application via telephone, e-mail, fax or letter. I understand that third parties may be consulted to verify qualifications, criminal convictions and health information should this be necessary for this post.

Signature

Date

<b>FOR OFFICE ADMINISTRATION USE ONLY</b>	Candidate No. <input type="text"/>	Invite for interview? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Interview Date <input type="text"/>	Appoint? Yes <input type="checkbox"/> No <input type="checkbox"/>

## Section H: Equal Opportunities Monitoring

CVS Falkirk and District's Equal Opportunities Policy aims to ensure that individuals are not discriminated against on the grounds of race, colour, culture, ethnic origin, religion, gender, disability, marital status, responsibility for dependants, sexual orientation or age. In order to monitor the effectiveness of the policy, all job applicants are asked to complete this form. The information will be used for monitoring purposes only.

Please complete all sections of the questionnaire below by placing a tick (✓) or by providing information where appropriate in the classification box applying to you in each section.

### Gender And Sexual Orientation

Female       Male   
Lesbian       Gay       Bisexual       Trans gender       Heterosexual

### Age

Under 21       22 - 34       35 - 49       50 - 64       65+

### Disability

Do you have a recognised disability as outlined in the Disability Discrimination Act (DDA): a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities?

Not Disabled       Disabled

Please state what that disability is

### Ethnic Origin

Individuals should determine with which of the undernoted categories they most closely associate themselves having regard to their ethnic or cultural background

White – Scottish	<input type="checkbox"/>	Asian – Indian	<input type="checkbox"/>	Black – Caribbean	<input type="checkbox"/>
White – Other British	<input type="checkbox"/>	Asian – Pakistani	<input type="checkbox"/>	Black – African	<input type="checkbox"/>
White – Irish	<input type="checkbox"/>	Asian – Bangladeshi	<input type="checkbox"/>	Black – Other	<input type="checkbox"/>
White – Other	<input type="checkbox"/>	Asian – Chinese	<input type="checkbox"/>	Other	<input type="checkbox"/>
		Asian – Other	<input type="checkbox"/>		

Where did you see this vacancy advertised?