

Application for Employment with VOCAL

Strictly confidential

|  |  |  |
| --- | --- | --- |
| Application for the post of:  **Carer Support Practitioner (SDS)** | **Application no** | **Date received** |

Important

* Please complete this form electronically, or in black ink
* Do not send a curriculum vitae (CV) with this form or in place of it
* Please return the completed form, marked “Private and Confidential”:

by email to: [jobs@vocal.org.uk](mailto:jobs@vocal.org.uk)

by post to: HR, c/o VOCAL

Edinburgh Carers Hub

60 Leith Walk,

Edinburgh EH6 5HB

* Your submission of this form constitutes a declaration that, to the best of your knowledge, the information given on it is true and accurate. Any misstatements or omissions could lead to disqualification of application, or dismissal if appointed.

## Personal Information

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | | |
| First Names |  | | |
| Address |  | | |
| Postcode |  | | |
| E-mail |  | | |
| Home phone |  | | |
| Mobile phone |  | | |
| Work phone |  | | |
| May we phone you at work? | | Yes | No |

1. **Supporting Statement (including interest in the post)**

Please state below your reason for applying for this post and the qualities and experience you consider make you a suitable applicant.

**Please ensure your statement demonstrates how your skills and experience match the criteria laid out in the person specification**.

A typed statement can be attached to the application.

1. **Present Employment**

If you are not working at present use this section to tell us about your last job.

|  |  |  |
| --- | --- | --- |
| Name and address of present (or most recent) employer |  | |
| Nature of employment |  | |
| Please describe the main duties |  | |
| Reason for leaving / wishing to leave: |  | |
| Annual salary | |  |
| Date employment started | |  |
| Date employment ceased | |  |
| Period of notice required (where applicable) | |  |

1. **Voluntary Work**

Please give details of any voluntary work, including dates and duration:

1. **Previous Employment**

Please start with the most recent and give exact dates where possible. Please use an additional sheet if necessary.

|  |  |  |
| --- | --- | --- |
| Name and address of employer |  | |
| Title of post |  | |
| Brief description of duties |  | |
| Reason for leaving |  | |
| Dates of employment | |  |

|  |  |  |
| --- | --- | --- |
| Name and address of employer |  | |
| Title of post |  | |
| Brief description of duties |  | |
| Reason for leaving |  | |
| Dates of employment | |  |

|  |  |  |
| --- | --- | --- |
| Name and address of employer |  | |
| Brief description of duties |  | |
| Reason for leaving |  | |
| Dates of employment | |  |

1. **Education (in chronological order)**

**Secondary Education** - Examinations Passed

### College/University

|  |  |  |
| --- | --- | --- |
| Name | Examinations passed | Date |
|  |  |  |

### Other courses/training etc undertaken

NB: Please do not enclose original documents with this application form. Candidates will be asked to produce original documents at interview.

1. **Membership of Professional Bodies**

|  |  |  |
| --- | --- | --- |
| Organisation | Grade held | Date admitted |
|  |  |  |

1. **Public Duties**

Please give details of any public service duties you are required to perform (e.g. JP, member of local authority, Quangos, board memberships, etc.)

1. **Referees**

* Please give the name, address and telephone number of two referees, who should not be related to you**. Please include e-mail address**.
* Ideally at least one should be your present, or most recent employer. We would prefer two business referees but will accept one personal referee if absolutely necessary.

|  |  |
| --- | --- |
| Referee 1 | Referee 2 |
|  |  |

* Please indicate in what capacity you know the referees by ticking the appropriate box.
* Please also indicate if you do not wish us to take up your references before the interviews have taken place. We always take up references.

|  |  |  |
| --- | --- | --- |
|  | Referee 1 | Referee 2 |
| In a work capacity |  |  |
| In a personal capacity |  |  |
| You may approach before interview |  |  |
| You may NOT approach before interview |  |  |

1. **Advertisement**

Please give details of where this post was advertised or how you heard about it.