

**APPLICATION FORM**

Your application may not be considered for short-listing if you do not complete all sections

Scottish Charity Number: SC032115

**PERSONAL INFORMATION *(Confidential)***

*“Personal details required for the processing of the application will be removed before being passed to the selection panel for consideration.  This is to ensure shortlisting is not influenced by age, disability, gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion/belief, sex or sexual orientation. The Organisation is fully committed to the promotion of equal opportunities*.”

|  |  |
| --- | --- |
| Post Title:  | Ref Number: |
|  |  |

**1. PERSONAL DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | Name: |  |  |
|  |  |  |  |
|  | Address: |  |  |
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|  |  |  |  |
|  |  |  |  | Postcode: |  |

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|  |  |  |  |  |  |  |  |  |
|  | Contact Details: (Please tick preferred contact detail) |
|  |  |  |  |  |  |  |  |  |
|  | Email Address: |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Telephone: |  |  | Home: |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  | Work: |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  | Mobile: |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

**DECLARATION – TO BE COMPLETED BY THE APPLICANT**

I declare that the information I have given in this application is accurate and true. I understand that providing misleading or false information will disqualify me from appointment OR, if appointed, may result in my dismissal.

Signature: Date:

u

2. EMPLOYMENT HISTORY

**PRESENT EMPLOYMENT**

(Current or most recent employer)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  | Name and address of employer: |  |  |  |
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|  | Position Held: |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Notice Required: |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Current Salary: £ |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Reason for Leaving: |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Date Left (If applicable): |  | Day |  |  | Month |  |  | Year |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**PLEASE DESCRIBE YOUR ROLE IN THE ORGANISATION AND OUTLINE YOUR RESPONSIBILITIES**

(Please continue on a separate sheet if necessary)

PREVIOUS EMPLOYMENT

**PREVIOUS EMPLOYMENT**

|  |
| --- |
| Please give details of all jobs including unpaid work, starting with your current or most recent employer |
|  |  |  |
| Employer (Name & Address) | Final Salary/Job Held/Key Responsibilities | Reason for Leaving |
|  |  |  |
|  |  |  |
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|  |  |  |
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**3. EDUCATIONAL, TECHNICAL AND PROFESSIONAL QUALIFICATIONS**

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| --- |
|  |

**4. PERSONAL DEVELOPMENT**

|  |
| --- |
|  |

**COMPETENCY**

**RELEVANT SKILLS, KNOWLEDGE AND EXPERIENCE**

In this section you are asked to outline how your knowledge, skills and experiences meet the requirement for this role (as outlined in the Job Description/Person Specification). You should draw on your experiences from your current or previous roles or from other relevant situation (such as activities outside work).

**5. COMMUNICATION**

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**6. PLANNING AND ORGANISING**

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|  |

**7. TEAM WORKING**

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|  |

**8. OTHER AREAS OF WORK WHICH YOU FEEL ARE RELEVANT TO THE POST (Please refer to Core Competencies and the Job Specific Competencies)**

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| --- |
|  |

**REFERENCES**

|  |  |  |
| --- | --- | --- |
|  | Please indicate two people who can provide references. Your main reference should be your Line Manager from your present or most recent job and your second reference should be from your previous employer. If you do not have work experience, please give other relevant referees: |  |
|  | Name: |  |  |  | Name: |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Address: |  |  |  | Address: |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Tel No: |  |  |  | Tel No: |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Email: |  |  |  | Email: |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Occupation: |  |  |  | Occupation: |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | I give/do not give permission to take up my reference prior to an offer of employment being made (delete as appropriate |  | I give/do not give permission to take up my reference prior to an offer of employment being made (delete as appropriate |  |
|  |  |  |  |  |  |  |  |  |
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**ASYLUM AND IMMIGRATION ACT 1996**

|  |  |  |
| --- | --- | --- |
|  | It is a criminal offence for an employer to employ those who do not have permission to live or to work in the UK. In general if you are not a British Citizen or Commonwealth Citizen with the right of abode in the UK, or a citizen of any country in the European Economic Area (EEA) you will require a work permit. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 1. | Are you a UK or European Economic Area National? |  | YES |  |  | NO |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 2. | If no, do you require a work permit to work in the UK? |  | YES |  |  | NO |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 3. | If you have answered yes to question 2 above, do you have a work permit to work in the UK? |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | YES |  |  | Work Permit Reference Number |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | NO |  |  |  |  |  |  |  |  |  |  |  |  |
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**REHABILITATION OF OFFENDERS ACT 1974 (EXCEPTIONS) ORDER 1975**

|  |  |  |
| --- | --- | --- |
|  | Because of the nature of the work for which you are applying, this post is exempt from the provisions of the Rehabilitations Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. You 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. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Have you ever been convicted of a criminal offence, or are you at present the subject of criminal charges? |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | YES |  |  |  | NO |  |  |  | If YES, please give details: |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |
|  | All employees have to complete a PVG form about their Police Record. |  |

**GENERAL**

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| --- | --- |
|  | Are there any adjustments that may be required to be made should you be invited for interview? *e.g. wheelchair access etc.* |
|  |  |  |  |  |  |
|  | If yes, please state here: |  |  |  |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
|  | Do you hold a Full/Provisional Driving Licence? |  | **YES/NO** |  |
|  |  |  |  |  |  |
|  | Do you have regular access to a car? |  | **YES/NO** |  |
|  |  |  |  |  |  |
|  | Are you entitled to work in the UK? |  | **YES/NO** |  |
|  |  |  |  |  |  |
|  | Are you related to any member of Staff or Board Member? | **YES/NO** |  |
|  | Please give details: |  |  |  |  |
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**DATA PROTECTION STATEMENT**

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| --- | --- | --- |
|  | The information that you provide on this form and that obtained from other relevant sources will be used to process your application for employment. The personal information that you give us will also be used in a confidential manner to help us monitor our recruitment process.If you succeed in your application and take up employment with us, the information will be used in the administration of your employment with us and to provide you with information about us or third party via your payslip. We may also use the information if there is a complaint or legal challenge relevant to this recruitment process.We may check the information collected, with third parties or with other information held by us. We may also use or pass to certain third parties information to prevent or detect crime, to protect public funds, or in other ways as permitted by law.By signing the application form we will be assuming that you agree to the processing of sensitive personal data, (as described above), in accordance with our registration with the Data Protection Commissioner.Signed:  |  |
|  | Date: |  |

**DIVERSITY MONITORING FORM**

*This section of the application will be detached from your application and will be used solely for monitoring purposes*

Mental Health Network (Greater Glasgow) recognises and actively promotes the benefits of a diverse workforce

and is committed to treating all employees with dignity and respect regardless of race, gender, disability, age,

sexual orientation, religion or belief. We therefore welcome applications from all sections of the community.

|  |  |  |  |  |  |  |  |  |
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|  | **Asian, Asian Scottish or Asian British** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | Indian |  | Pakistani |  | Bangladeshi |  | Any other Asian |  |
|  |  |  |  |  |  |  |  |  |  |  |  | Background\* |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Black, Black Scottish or Black British** |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | African |  | Caribbean |  |  |  |  |  | Any other Black  |  |
|  |  |  |  |  |  |  |  |  |  |  |  | Background\* |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Chinese or other Ethnic Group** |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | Chinese |  | Other Ethnic Group\* |  |  |  |  |  |  |
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|  | **Mixed** |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | White & Black Caribbean  |  | White & Black African |  | White & Asian |  | Any other mixed |  |
|  |  |  |  |  |  |  |  | Background\* |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **White** |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | Scottish |  |  | Other British |  |  | Irish |  |  |  | Any Other White |  |
|  |  |  |  |  |  |  |  |  |  |  | Background\* |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | \* Please specify |  |  |  |  |  |  |  |  |  |  |  |
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|  | **Gender** Please Specify: |  |

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| --- | --- | --- |
|  | **Date of Birth** |  |

**DIVERSITY MONITORING FORM**

The Employment Equality (Sexual Orientation) Regulations 2003 and The Employment Equality (Religion or Belief) Regulations 2003 came into effect on 1 and 2 December 2003 respectively. These new regulations outlaw

discrimination on the grounds of sexual orientation, religion or belief. This information will remain **confidential and anonymous** and will not be seen by or made known to those involved in the selection process.

**If you wish, you may disclose information about yourself in this section.**

|  |  |  |
| --- | --- | --- |
|  | **RELIGION OR BELIEF** (Please specify your religion or belief) |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Buddist |  |  |  | Christian (please tick appropriate box to indicate denomination) |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Hindu |  |  |  |  |  | Church of Scotland |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Jewish |  |  |  |  |  | Roman Catholic |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Muslim |  |  |  |  |  | Other Christian (please specify) |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Sikh |  |  |  | None |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Any other religion or belief (e.g. Pacifism) |  | (please specify) |  |
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|  | **SEXUAL ORIENTATION** |  | Do you consider yourself to be: |  |
|  |  |  |  |  |  |  |  |  |  |
|  | Bisexual |  |  | Hetrosexual |  |  | Homosexual (Gay, Lesbian) |  |  |
|  |  |  |  |  |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  | **How did you become aware of this vacancy? Website** |  |  |  |
|  |  |  |  |  |  |  |
|  |  | Date: |  | Ref: |  |  |
|  |  |  |  |  |  |  |

**DISABILITY**

|  |  |  |
| --- | --- | --- |
|  | Please specify your full name |  |

The information you provide on disability will not be made available to the selection panel for use as part of the selection process.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
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|  | **DISABILITY** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  | The Disability Discrimination Act (1995) defines a disability as any physical or mental impairment, which has a substantial and long-term (more than 12 months) adverse effect on a person’s ability to carry out normal day to day activities. |  |
|  |  |  |  |  |  |  |  |
|  | Do you have a medical condition or disability which could affect your ability to carry out the duties of the post?(Please tick (MCWB01114_0000[1] ) appropriate box) |  |
|  |  |  |  |  |  |  |  |
|  | YES |  |  | NO |  |  |  |
|  |  |  |  |  |  |  |  |
|  | If YES, please give details of: |  |  |  |
|  |  |  |  |  |  |  |  |
|  | 1. | Your condition or disability: |  |  |  |
|  |  |  |
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|  | 2. | How this could affect your ability to carry out duties of the post: |  |
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|  |  |
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|  | 3. | Adjustments Mental Health Network might reasonably make to enable you to carry out the duties effectively: |  |
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