**JOB APPLICATION FORM**

**SECTION A**

**Section A is detached before shortlisting**

**Personal Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Name(s) |  |
| Address |  | | |
| Phone Number |  | | |
| Email address |  | | |

**Data Protection**

The information provided by you on this form will be used to assist with the process of recruitment. Additionally, the data provided may be processed by Cyrenians for the purposes of equality monitoring and compiling statistics. We keep completed application forms for 12 months if unsuccessful, after which all information and correspondence will be deleted. If you are successful in your application, information provided may be transferred to your employee records.

By singing the declaration below you consent to Cyrenians processing your data in the way described above.

**Declaration**

I declare that the information given in this form application is true and I understand that false or misleading information will lead to my exclusion from the selection process and may lead to dismissal in the event of appointment.

I understand that the post for which I am applying is subject to satisfactory Disclosure checks.

I understand that successful candidates will be expected to provide proof of their eligibility to work in the UK.

Signed: Date:

**Equal Opportunities Monitoring Form**

Cyrenians intends to ensure equality of opportunity. We welcome applications from all sectors of the community and regularly view our recruitment procedures to ensure our equal opportunities policy is being properly implemented.

*If you choose not to complete this section, your application will* ***not*** *be affected*.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Post applied for:** | | | | | | | | | Gambling Harms Capacity Builder | | | | | |
| **I define my gender as:** | | | | | | | | | | | | | | |
| Male | | |  | | | Female | |  | Prefer not to say | | | | |  |
| If you describe your gender in another way please provide this here: | | | | | | | | |  | | | | |  |
| **Do you consider yourself to have a disability?** | | | | | | | | | Yes |  | No | | |  |
| **Ethnic group I identify as:** | | | | | | | | | | | | | | |
| **White** | | | | | | | | | | | | | | |
| Scottish |  | | | | Other British | | |  | Roma/Traveller | | | | |  |
| Irish |  | | | | Polish | | |  | Other, please specify: | | | | |  |
| **Mixed** Any mixed or multiple ethnic groups, please specify: | | | | | | | | |  | | | | | |
| **Asian** | | | | | | | | | | | | | | |
| Pakistani, Pakistani Scottish or Pakistani British | | | | | | | |  | Bangladeshi, Bangladeshi Scottish or Bangladeshi British | | | | |  |
| Indian, Indian Scottish or Indian British | | | | | | | |  | Chinese, Chinese Scottish or Chinese British | | | | |  |
| Other, please specify: | | | | | | | |  | | | | | | |
| **African** | | | | | | | | | | | | | | |
| African, African Scottish or African British | | | | | | | |  | Other, please specify: | | | |  | |
| **Caribbean or Black** | | | | | | | | | | | | | | |
| Caribbean, Caribbean Scottish or Caribbean British | | | | | | | |  | Other, please specify: | | | |  | |
| **Other ethnic group** | | | | | | | | | | | | | | |
| Arab, Arab Scottish or Arab British | | | | | | | |  | Other, please specify: | | | |  | |
| **Your age** | | | | | | | | | | | | | | |
| 25 or under |  | | | 36-45 | | |  |  | 56 or over | | | | |  |
| 26-35 |  | | | 46-55 | | |  |  |  | | | | | |
| *To ensure compliance with the Employment Equality (Sexual Orientation) Regulations 2003 and Employment Equality (Religion and Belief) Regulations 2003 we ask the following questions, however your response to these questions is optional.* | | | | | | | | | | | | | | |
| **Self-Identified Sexual Orientation. Which of the following options best describes how you think of yourself?** | | | | | | | | | | | | | | |
| Bisexual | |  | | Gay/Lesbian | | | |  | Prefer not to say | | |  | Other |  |
| Heterosexual/Straight | | | | | | | |  | Other, please specify: | | | |  | |
| **Faith /Belief** Do you have a particular faith or belief system? | | | | | | | | | | | | | | |
| If so please specify: | | | | | | | | |  | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Where did you learn of this vacancy?** | | | | | | |
| Cyrenians Website |  | S1 Jobs |  | Indeed |  |  |
| Goodmoves |  | Other source (please specify): | | | | |

**Eligibility to work in the UK**

All employees must be able to demonstrate that they are legally entitled to work in the United Kingdom.

In order to apply for employment with Cyrenians, you must declare that you have the right to work in the United Kingdom and that, if successful, you will be able to provide the necessary documentation (typically a passport or a birth certificate, together with your National Insurance Number).

By completing this application form, you are declaring that you are legally entitled to work in the United Kingdom.

**Please state below, by selecting the statement that applies to you, if there are any restrictions or limitations on your legal right to work in the United Kingdom.**

|  |  |  |
| --- | --- | --- |
| I confirm that I have the right to work in the United Kingdom without restriction | |  |
| or | | |
| I confirm that I have the right to work in the United Kingdom and I hold the appropriate Visa documentation to confirm this right. | | |
| Expiry date of visa: |  | |
| I have no restrictions or limitations on my Visa | |  |
| I am restricted to (please detail any restrictions or limitations on working in the UK here): | |  |

**SECTION B**

|  |  |
| --- | --- |
| Application ref:  (for office use only) |  |
| Job you are applying for: | **Gambling Harms Capacity Builder** |

Having read the job description, please answer the following questions, telling us why you are a good fit for the post. A typed or neat-hand written application is acceptable. Do not include a CV or other papers.

**Employment History**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Current Employer  (or most recent) |  | | | |
| Role / Job Title |  | | | |
| Dates employed | From |  | To (leave blank if current employer) |  |
| Key responsibilities (particularly those relevant to the post for which you are applying) |  | | | |
| Salary |  | | | |
| Reason for leaving  (if applicable) |  | | | |

List your previous jobs, with a brief description of the work and your specific role and responsibilities. Please add more sections if required.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employer** |  | | | |
| Role / Job Title |  | | | |
| Dates employed | From |  | To |  |
| Relevant responsibilities |  | | | |
| Reason for leaving |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employer** |  | | | |
| Role / Job Title |  | | | |
| Dates employed | From |  | To |  |
| Relevant responsibilities |  | | | |
| Reason for leaving |  | | | |

**Volunteering experience**

Please add any relevant volunteering experience you have:

|  |
| --- |
|  |

**Your Education, Training and Qualifications**

List all educational, vocational & professional qualifications achieved:

|  |  |
| --- | --- |
| Course / qualification | Level achieved |
|  |  |
|  |  |
|  |  |
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|  |
| --- |
| Please list any professional registrations and renewal dates(e.g. SSSC, nursing and midwifery council) |
|  |

**Values**

Cyrenians values are very important to us. Our core values are:

* respect,
* compassion
* integrity
* innovation

|  |
| --- |
| Please outline here how you think your own personal values align ours. |
|  |

**Supporting Statement**

|  |
| --- |
| Please explain why you are a suitable candidate for this post and why you want to work for Cyrenians.  Please use the person specification in the job description as a framework to demonstrate your related skills and experience.  If you don’t have relevant specific evidence, please explain why you think you are the right person for the post.  Please limit your reply to no more than 500 words. |
|  |

**References**

Please give the names of two referees you have worked closely with recently, **one of whom should be your present or most recent employer**. Please advise your referees that we will be contacting them as part of our decision-making process. No offer of employment will be made without references.

|  |  |
| --- | --- |
| **Employment Referee** (this should be your current or most recent employer) | |
| Name |  |
| Position |  |
| Organisation and Address |  |
| Telephone number |  |
| Email address |  |
| How long have you known this referee? |  |
| In what capacity? |  |
| Can we contact them prior to interview? |  |

|  |  |
| --- | --- |
| **Second Referee** | |
| Name |  |
| Position |  |
| Organisation and Address |  |
| Telephone number |  |
| Email address |  |
| How long have you known this referee? |  |
| In what capacity? |  |
| Can we contact them prior to interview? |  |

Please return your form to [recruitment@cyrenians.scot](mailto:recruitment@cyrenians.scot).

If you have any problems with completing this form, or any queries we may help with, please let us know.