

APPLICATION FOR EMPLOYMENT

Please complete this application form in black ink or type. All information will be treated in the **strictest confidence**.

CEMVO Scotland

Tel: **0141 248 4830**

Lancefield House, 1st Floor

95-107 Lancefield Street, Glasgow, G3 8HZ

Please return form to:

Application No:

(Official Use)

		Email: info@cemvoscotland.org.uk
1. General Information		
Position Applied For		Where vacancy seen:
Are you seeking full or par	t-time?	
If part-time, please state h	ow many hours:	
2. Personal Details		
Forenames		Surname
Home Tel.	Work Tel No.	Mobile:
Address:		Email:
		Post Code:

3. Present or most recent employer **Employer's Name and Address** 3.1 - Current Employers **Employer's Name and Address Position Held: Date Commenced: Duties Reason for Leaving Current or Most Recent Salary Period of Notice Required**

3.1 - Previous Employment - State most recent employment first

Employer's Name and Address Dates Position Duties

School/College Subject Date Grade Qualification 6. Professional & Higher Education College /University Grade Date Subject/Qualification 7. Membership of Professional Body

8. Other Training or Short Courses

9. Experience

Please provide a supporting statement highlighting your skills and experience relevant to the post that you are applying for.

You should specifically relate your skills and experience to the essential and desirable criteria's on the person specification for this post.

Experience (Continued)

10. Interview Arrangements and Availability

If you have a disability, please tell us if there are any reasonable adjustments, we can make to help you in your application or with our recruitment process.

Are there any dates when you will not be available for interview?

When can you start working for us? (Notice period)

Right to work in the UK
Yes

Yes / No

Do you need a work permit to work in the UK? No

11. References

Referee #1

Please give names and addresses of two referees from whom we might obtain an employment reference. One should be your most recent employer (school or college if you are a student). Referees will only be contacted after an offer has been made.

Referee #2

Name:	Name:
Position:	Position:
Address:	Address:
Telephone Number:	Telephone Number:
reiephone Number.	relephone Number.
Relationship to you:	Relationship to you:
Decl	aration
I confirm that to the best of my knowledge the inform correct and I accept that providing deliberately false	
Name:	
Signature:	
Data	
Date:	

APPLICATION FOR EMPLOYMENT

CEMVO Scotland's Equalities Policy includes ensuring that we attract a wide pool of applicants from all protected characteristics which will ensure a diverse make up of our staff. We also want to ensure that our recruitment and selection processes are fair and non-discriminatory. To help us monitor the effectiveness of this policy we would be grateful for your help in completing the questionnaire below. Please be assured that completed questionnaires will be detached from your application form and will play no part in the selection process.

ppneatio	n No: (Official (Use)	Po	osition Applied for:	
Gender					
Man	Woman	Intersex	Non-binary	Prefer not to say	
If you pro	efer to use you	r own term, ple	ease specify here:		
Are you	married or ir	n a civil partn	ership?		
Are you Yes	married or in	n a civil partn	•		
-		•	•		
Yes		•	•	45-49	

What is your ethnicity?

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you percieve you belong. Please tick the appropriate box below.

White

English	Welsh	Scottish	Northern Irish	Irish	British
Gypsy or Ir	ish Traveller	Prefer not to	say Any other v	vhite backgro	ound:

Mixed/multiple ethnic groups

mines, manufacture 8. caps		
White and Black Caribbean	White and Black African	White and Asian

Prefer not to say Any other mixed background:

South & Far Eastern Asian/Asian British Indian Pakistani Bangladeshi Chinese Prefer not to say Any other Asian background: Black/ African/ Caribbean/ Black British **African** Caribbean Prefer not to say Any other Black/African/Caribbean background: Other Ethnic group: Prefer not to say Arab Any other ethnic group, please write in:

Do you consider yourself to have a disability or health condition?

No Prefer not to say

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:

Yes

The information in this form is for monitoring purposes only. If you are the successful candidate and believe you need a 'reasonable adjustment' then we can discuss this on your appointment.

What is your sexual orientation

Heterosexual Gay Lesbian Bisexual Prefer not to say
Other

What is your religion or belief?

Buddhist Christian Hindu Jewish Muslim

Sikh No religion or belief Prefer not to say

Other

What is your current working pattern?

Full-time

Part-time

Prefer not to say

What is your flexible working arrangement?

None Flexitime Staggered hours Term-time hours Annualised hours

Job-share Flexibile shifts Compressed hours Homeworking

Prefer not to say Other

Do you have any caring responsibilities? If yes, please tick all that apply.

None

Primary carer of a child/children (under 18)

Primary carer of disabled child/children

Primary carer of disabled adult (18 and over)

Primary carer of older person

Secondary carer (another person carries out the main caring role)

Prefer not to say

THANK YOU FOR YOUR HELP!

- The CEMVO Scotland Team