**EMPLOYMENT APPLICATION FORM**

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| **1.PERSONAL DETAILS** |
| First Name |  | Surname |  |
| Address |  |
| Postcode |  | Mobile |  |
| Email Address |  |

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| **2.POSITION APPLIED FOR** |
| Job Title |  |
| Job Location |  |
| Where did you see this vacancy advertised? |  |

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| **3.WORK PERMIT** |
|  | Yes | No |
| Do you require a Work Permit to work in the UK? |  |  |
| If yes, do you possess a Work Permit that is valid for the position applied for? |  |  |
| Please note, you will be required to provide this documentation if you are selected for interview |

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| **4.SSSC** |
|  | Yes | No |
| Are you currently registered with the Scottish Social Service Council (SSSC) |  |  |
|  | Reg No. | Date |
| If yes, please provide your registration number and date of registration. |  |  |

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| **5.PVG** |
|  | Yes | No |
| Are you a member of the PVG scheme? |  |  |
|  | Reg No. | Date |
| If yes, please provide your registration number and date of registration. |  |  |

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| **6.UK DRIVING LICENCE** |
|  | Yes | No |
| Do you hold a current UK driving licence? |  |  |
|  | Provisional | Full |
| If yes, please note the type of licence |  |  |

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| **7.EQUALITY** |
| As holders of the Positive about Disabled People symbol we have a commitment to interview all disabled applicants who meet the minimum criteria for a job vacancy and consider them on their abilities. |
|  | Yes | No |
| Do you consider yourself to be a disabled person within the meaning of the Equality Act 2010? |  |  |

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| **8.CURRENT / LAST EMPLOYER** |
| Position Held |  | Salary |  |
| Date From |  | Date To |  |
| Name of Employer |  |
| Address |  | Postcode |  |
| Reason for Leaving |  |
| Brief Description of Duties |  |

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| **9.PREVIOUS EMPLOYMENT** |
| Name of Employer | Date From | Date To | Job Title | Reason for Leaving |
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| **10.SUPPORTING STATEMENT** |
| In this section, please demonstrate how your skills and experience meet the requirements of the job description and person specification. You may also include any other information that you feel is relevant to your application, e.g., personal qualities, achievements at work, non-related or voluntary work experience. |
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| **11.EDUCATION AND TRAINING** |
| School / Uni / College | Date Achieved | Qualification | Subject | Grade |
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| **12.DECLARATION OF ANY FAMILY OR CLOSE RELATIONSHIPS** |
|  | Yes | No |
| Have you ever applied for a post with Cosgrove Care ? |  |  |
| Have you ever worked for Cosgrove Care? |  |  |
| Does any of your immediate family work for Cosgrove Care or use one of our services? |  |  |
| If yes, please give their name and service details: |
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| **13.REFERENCES** |
| Please give details of three referees, two of whom must be able to comment on your professional suitability for the post and one whom must be your current or most recent employer. If you have had no previous employment, please ensure one referee is someone that had known you for at least three years. Please note that if you tick ‘No’ about contacting your referee before your interview, we will approach this referee after offer of employment is issued. Relatives will not be accepted as a suitable referee. |
| Name |  | Job Title |  |
| Company Name |  | Email Address |  |
| Company Address |  | Tel Number |  |
|  | Yes | No |
| May we contact this referee prior to job offer? |  |  |
|  | Employer | Character |
| What type of reference will this person provide? |  |  |

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| --- | --- | --- | --- |
| Name |  | Job Title |  |
| Company Name |  | Email Address |  |
| Company Address |  | Tel Number |  |
|  | Yes | No |
| May we contact this referee prior to job offer? |  |  |
|  | Employer | Character |
| What type of reference will this person provide? |  |  |

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| --- | --- | --- | --- |
| Name |  | Job Title |  |
| Company Name |  | Email Address |  |
| Company Address |  | Tel Number |  |
|  | Yes | No |
| May we contact this referee prior to job offer? |  |  |
|  | Employer | Character |
| What type of reference will this person provide? |  |  |

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| **14.DECLARATION** |
| I understand that if I deliberately use misleading information to gain employment with Cosgrove Care, I may be instantly dismissed at a later date. The information contained in this application is, to the best of my knowledge, correct. |
| Signature: |  |
| Date: |  |