

Application Form – Information and Advocacy Worker

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| --- | --- |
| Name |  |
| Address |  |
| Mobile |  |
| E-mail |  |

Please provide the name and contact details of two referees who can comment on your suitability for the post. References will only be contacted if a conditional offer of employment is made.

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| --- | --- |
| Referee 1 | Name:  Mobile:  Email:  Relationship to you (employer/personal): |
| Referee 2 | Name:  Mobile:  Email:  Relationship to you (employer/personal): |

Employment

Please provide details of any voluntary work and paid posts you have held, starting with the most recent. There is no need to include more than 3 posts. If you wish to list other relevant employment history, please provide this separately but no more than one additional page of A4 please.

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| --- | --- | --- | --- |
| Name and Address of Organisation/Employer | Date started (mm/yy) | Date ended (mm/yy) | Brief outline of your role and main duties |
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Qualifications and Training (starting with most recent)

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| --- | --- | --- |
| Relevant qualifications | Date | Title & Awarding College/University/Agency |
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Please provide examples of your ability and experience that meet each of the criteria in the person specification within the job description in order. (Max 2 sides of A4)

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We wish to appoint candidates who are well suited to the ethos of our organisation. Please complete the following questions: You may find it useful to refer to our website and Facebook

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| 1. Why are you interested in this post? |  |
| 2. What experience do you have of disability? (personal and/or professional) |  |
| 3. Is there any additional information you would like us to consider? |  |

August 2025

Please return your application to: [Veronica.Warrington@kindred-scotland.org](mailto:Veronica.Warrington@kindred-scotland.org)

If you need any adjustments for the application form, please contact Veronica