

**Application Form**

# If you wish to be considered for this post please complete this application in full and email it to [**jobs@scottishlibraries.org**](mailto:jobs@scottishlibraries.org) by the specified closing date/time via the vacancy link found here: https://scottishlibraries.org/about-us/vacancies/

CVs will not be accepted. Please refer to the **job description** when you complete the personal statement section.

# Data Protection Notice: The Scottish Library and Information Council will use this information solely for the intended reason it was gathered. All copies, physical and electronic, will be destroyed six months after the closing date if the applicant is unsuccessful.

**Important**  **read carefully before submitting application**

By submitting this form you agree to the following statement:

I certify that all statements made by me on this form are true and complete to the best of my knowledge. I realise that if I am employed and it is found that such information is untrue, my appointment may be reviewed and this could lead to dismissal.

## POST

**Programme Officer- Eresources**

**Personal details**

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Phone: |  |
| Email: |  |

## Personal statement

Please tell us why you applied for this job and why you think you are the best person for the post. Please link this directly to the Essential and Desirable criteria outlined in the job description.

Maximum 500 words

## Education and relevant training

Please give details:

|  |  |
| --- | --- |
| Educational Establishment/Body | Qualification |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

## Employment history

Your current or most recent employer

|  |  |
| --- | --- |
| Name of employer: |  |
| Address: |  |
| Job title: |  |
| Salary: |  |
| Length of time with employer: |  |
| Notice period: |  |
| Reason for leaving: |  |

Duties and skills you require and have learned:

Maximum 250 words

## Previous employers

Please tell us about other jobs you have done and about the skills you used or learned in those jobs.

|  |  |
| --- | --- |
| Name of employer: |  |
| Address: |  |
| Job title: |  |
| Dates of employment: |  |
| Reason for leaving: |  |

Duties:

Maximum 250 words

|  |  |
| --- | --- |
| Name of employer: |  |
| Address: |  |
| Job title: |  |
| Dates of employment: |  |
| Reason for leaving: |  |

Duties:

Maximum 250 words

|  |  |
| --- | --- |
| Name of employer: |  |
| Address: |  |
| Job title: |  |
| Dates of employment: |  |
| Reason for leaving: |  |

Duties:

Maximum 100 words

## 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?

## Right to work in the UK

Do you have the right to work in the UK? Yes / No

We will require evidence of this before any appointment can be made.

## References

Please give the names and contact details of two people who we can ask to give you a reference, one of which MUST be your current employer. Please note: Relatives and personal

friends should not be used. We will not approach your current employer until we get your permission.

Referee 1

|  |  |
| --- | --- |
| Contact name: |  |
| Company name: |  |
| Contact’s position: |  |
| Contact number: |  |
| Email: |  |
| Dates employed: |  |

Referee 2

|  |  |
| --- | --- |
| Contact name: |  |
| Company name: |  |
| Contact’s position: |  |
| Contact number: |  |
| Email: |  |
| Dates employed: |  |

## Declaration

I confirm that to the best of my knowledge the information I have provided on this form is correct and I accept that providing false information could result in my dismissal. *(Electronic signatures accepted)*

|  |  |
| --- | --- |
| Name |  |
| Signature |  |
| Date |  |