|  |  |
| --- | --- |
| **Role Applied For** |  |

|  |  |  |
| --- | --- | --- |
| **Personal Details** | | |
| **Name** |  | |
| **Address** |  | |
| **Email** |  | |
| **Telephone** |  | |
| Where did you see the post advertised? | |  |
| If offered the post, when could you start? | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Disclosure Scotland PVG Scheme Membership & SSSC** *Please refer to the job description for details of checks/registrations required for this position.* | | | | |
| Are you registered with the SSSC? | **Yes** |  | **No** |  |
| If you are registered with the SSSC please state in what capacity. |  | | | |
| SSSC Registration Number |  | | | |
| Are you a PVG Scheme Member? | **Yes** |  | **No** |  |
| If you are a PVG Scheme Member please state which group/s your membership is for.  This information can be found on your PVG Certificate or in your online Disclosure Scotland ‘Scot Account’. It is important that it is accurate to support any future PVG scheme application from EWA for you. | **Vulnerable Adults** | | |  |
| **Children** | | |  |
| **Both** | | |  |
|  | | | |

**The information in sections 1 – 3 will be used for short listing purposes and will be seen by all those involved in the selection process.**

|  |  |  |
| --- | --- | --- |
| **Section 1: Education And Training**  *Proof will be required from the successful candidate. Please refer to the job description for information of the academic/vocational qualifications relevant to this position.* | | |
| **Qualification** | **Awarding Body** | **Date Of Award** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have a current driving licence? | **Yes** |  | **No** |  |
| What is the country of issue of your licence? | **Yes** |  | **No** |  |
| Do you have access to transport? | **Yes** |  | **No** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Section 2: Employment History**  *Start with your present or most recent employer and list in chronological order, including part time and voluntary employment.*  *Please also include explanations for periods not in employment or in training/education.* | | | |
| **Organisation & Address** | **Start Date** | **Leaving Date** | **Role Title / Brief Description of Duties / Reason for Leaving** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*Please add more rows if required.*

|  |  |
| --- | --- |
| Please state if you are currently involved in a disciplinary or grievance procedure and if you have any live formal warnings. |  |
| Please give details of any personal, family or close relationships to existing Edinburgh Women’s Aid employees or Board Members, or with any Edinburgh Women’s Aid service users. |  |

|  |
| --- |
| **Section 3: Supporting Information**  *Referring to the specific requirements of the person specification, please give details of how your personal qualities, experience and achievements to date would make you a suitable candidate for this post.* |
|  |
| **Section 4: Referees**  *Two references are required for this post.*   * *One reference must be from your current employer or most recent employer.* * *References will not be accepted from relatives or friends.* * *Please do not use your current agency as a referee if you are working for an agency at present.* * *Please note that any offer of employment will be conditional upon receipt of two satisfactory references and the appropriate disclosure check.* * *As a prospective employer we may contact any former employer in addition to the referees nominated below. However, this will only be done in exceptional circumstances and we will advise of our intention before doing so.* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **My current employer may be contacted prior to interview?** | **Yes** |  | **No** |  |

|  |  |
| --- | --- |
| **Reference One** | |
| **Name** |  |
| **Role** |  |
| **Organisation** |  |
| **Email Address** |  |
| **Contact Number** |  |
| **In what capacity do you know this person?** |  |

|  |  |
| --- | --- |
| **Reference Two** | |
| **Name** |  |
| **Role** |  |
| **Organisation** |  |
| **Email Address** |  |
| **Contact Number** |  |
| **In what capacity do you know this person?** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section 5: Self Declaration Form and Disclosure Check**  *This post will require completion of a Self-Declaration Form and the appropriate level of PVG Disclosure Scotland check. Disclosure Scotland checks will only be requested for those applicants that we wish to appoint.* | | | | |
| **Self-Declaration Form**  *Please confirm that you have completed the Self-Declaration form and returned it, either by email or in a sealed envelope clearly marked “Self-Declaration Form”. This Self-Declaration form will only be viewed/opened if you are offered and accept the role.* | **Yes** |  | **No** |  |
| **Disclosure Record**  *Please confirm that you understand and agree to a Disclosure Scotland check should we wish to appoint you to a post considered to be regulated work.* | **Yes** |  | **No** |  |

|  |  |  |
| --- | --- | --- |
| **Section 6:**  *I declare that the information I have given in this application form is correct to the best of my knowledge. If any information should prove to be false, inaccurate or misleading, I understand that my application will be disqualified and, if an appointment is made, then this may lead to dismissal.* | | |
| **Applicant Signature** |  | |
| **Date** |  |  |