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| For Office Use Only |
| Applicant Ref No: |  |

**Application Form**

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| **Application for the Post of:** | Personal Assistant |
| **Post Reference No** | SDS/LSC/023 |

**Part 1 – Not Shared with the Shortlisting Panel**

**Personal Details**

|  |  |
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| Surname: |  |
| Forename(s): |  |
| Home Address: |  |
| Home telephone Number: |  |
| Mobile Telephone Number: |  |
| Email Address:*(If you provide the employer with your email address they may contact you this way.)* |  |

**Driving Licence**

|  |  |
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| Do you hold a current driving licence?  | Yes [ ]  No [ ]   |
| If Yes, please detail below any driving offences currently under endorsement: |  |

**Eligibility to Work within the United Kingdom**

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| --- | --- |
| Are you eligible for employment within the UK? | Yes [ ]  No [ ]   |
| Do you require a Work Permit to work within the UK?  | Yes [ ]  No [ ]   |
| If Yes, please confirm your work permit/leave to remain expiry date:  | \_\_\_\_/\_\_\_\_/\_\_\_\_  dd mm yy |
| If Yes, please confirm details of any endorsements (stamps, visas etc.) and or any restrictions placed upon your work permit: |  |

**Other Employment**

|  |  |
| --- | --- |
| If offered this position, would you continue to work in any other capacity?  | Yes [ ]  No [ ]   |
| If Yes, please provide details of the other employment you would undertake inclusive of job role and contracted hours per week. |  |

**PVG Scheme**

If the appointment is subject to a Disclosure Scotland/PVG Scheme check (see advert/job description), depending on the type of Disclosure, some spent convictions may be reported to the employer. (This will not necessarily discount you from being considered for the post.)

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| --- | --- |
| Are you registered with the PVG Scheme to work with Protected Children/Adults? | Yes [ ]  No [ ]  |
| If **Yes**, please confirm your PVG membership number: |

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**Police Check**

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| Do you have any criminal convictions or pending charges?  |  |
| If **Yes**, please provide the employer with further details of the criminal convictions or pending charges against you. |  |

**Interview Availability**

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| --- | --- |
| Are you available for interview at any time?  | Yes [ ]  No [ ]   |
| If **No**, please provide details of the dates where you would be unavailable to attend interview. |  |

**Referees**

One must be your present or most recent employer or school/college. The employer may not accept references from relatives/friends. The employer reserves the right to request more than 2 references. If you provide your referee email addresses, the employer may contact them this way*.*

**Referee 1**

|  |  |
| --- | --- |
| Name: |  |
| Position: |  |
| Company (if applicable): |  |
| Address: |  |
| Postcode: |  |
| Contact Telephone Number: |  |
| Email Address: |  |
| Do you give the employer permission to contact this referee? | Yes [ ]  No [ ]   |

**Referee 2**

|  |  |
| --- | --- |
| Name: |  |
| Position: |  |
| Company (if applicable): |  |
| Address: |  |
| Postcode: |  |
| Contact Telephone Number: |  |
| Email Address: |  |
| Do you give the employer permission to contact this referee? | Yes [ ]  No [ ]   |

**Advertisement of vacancy**

|  |  |
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| Please tell the employer where you heard/saw this vacancy advertised |  |

**Declaration**

I declare that the information given in **Part 1** of this application for employment is true and complete to the best of my knowledge. If any of this information given by me in this form or in support of my application is untrue, I recognise that any offer of employment/work may be withdrawn or, my employment terminated.

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| --- | --- |
| **Signature:***(Please only sign with your initial and surname)* |  |
| **Date:** |  |

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| Applicant Ref No: |  |

**Part 2 – Assessed by the Shortlisting Panel**

|  |  |
| --- | --- |
| **Application for the Post of:** |  |
| **Post Reference No** |  |

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| **Qualifications/Memberships** |

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| --- |
| Please indicate below qualifications gained at School, College or University. You need only provide the date awarded for College or University qualifications or time served apprenticeships. |
| Subject/Details | Qualification and Status of Membership (if applicable) | Grade | Date Awarded |
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| **Courses Attended/Other Relevant Specialised Training Knowledge** |
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| **Employment History** |
| This is your present or most recent employment, voluntary work or work experience. *(Please continue on an additional sheet, if required).* |
| Name of Employer: |  |
| Address of Employer: |  |
| Nature of Business: |  |
| Post Held: |  |
| Dates of Employment: | From: | To: |
| Salary: | Current: £ | Expected: £ |
| Reason(s) for Leaving or Wishing to Leave |  |
| Notice Required: |  |
| Duties and Responsibilities: |  |

|  |
| --- |
| **Previous Employment** |

Please start with most recent and include any periods not in paid employment, voluntary work or work experience (please continue on an additional sheet, if required).

|  |  |  |  |
| --- | --- | --- | --- |
| Dates (Month/Year)  From To | Name and Address of Employer | Position Held, Description of Duties and Responsibilities | Reason(s) for Leaving |
|  |  |  |  |  |

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| **Suitability for the Post** |

Please refer to the person specification provided in the application pack you received and comment on how you meet the criteria (please continue on a separate sheet, if required).

|  |  |
| --- | --- |
| **Criteria Reference** | **Your skills, qualities and experience against each of the person specification criteria**  |
| Example E[no] | Example response: I have [no] of years’ experience in a [setting] which included [example(s)]. |
|  |  |

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| --- |
| **Voluntary Work** |
| Please tell the employer about any voluntary work that you have been/continue to be actively involved in. |
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|  |
| **Further Information** |

Please use the space below to tell the employer why you are applying for this position and any other relevant information you would like them to know (continue on a separate sheet, if necessary).

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| **Declaration** |
| I declare that the information given in **Part 2** of this application for employment is true and complete to the best of my knowledge. If any of this information given by me in this form or in support of my application is untrue, I recognise that any offer of employment/work may be withdrawn or, my employment terminated. |
| **Signature:***(Please only sign with your initial and surname)* |  |
| **Date:** |  |

**Please return your completed application form by email to:**

Email Address: recruitment@sdsoptionsfife.org.uk