**CENTRAL CARERS**

For office use only

Applicant No:

**ASSOCIATION**

**APPLICATION FORM**

(Please complete application in type only and ensure it is completed in full)

Applicants should understand that any misstatements or omissions will lead to disqualification of application or dismissal if appointed.

**Part 1 – Not shared with shortlisting/recruitment panel**

**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Surname: |  |
|  |  |  |  |
| Other names: |  |
|  |  |  |  |
| Address: |  |
|  |  |
| Postcode: |  |
|  |  |  |  |
| Contact Telephone Number: |  |
|  |  |  |  |
| Email: |  |

|  |  |  |
| --- | --- | --- |
| Are there any restrictions on you taking up employment in the UK? | Yes |[ ]  No |[ ]
|  |  |  |  |  |

**OTHER EMPLOYMENT/TRAINING/EDUCATION/VOLUNTEERING**

Please note any of other employment/training/education/volunteering you would continue with if you were to be successful in obtaining this position.

|  |
| --- |
|  |

|  |
| --- |
| Where did you hear about this vacancy?  |
|[ ]  Carers Website |[ ]  Social Media |[ ]  My Job Scotland (MJS) |
|  |  |[ ]  Other |  |

If invited for interview, do you have any accessibility requirements?

If yes, please give details below:

|  |
| --- |
|  |

**References**

Please give the names and contact details of two referees, one of whom should be your present or most recent employer. Please note that that you may not give the name of someone who is related to you, and we would prefer two business reference, however one personal referee will be accepted if necessary.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: |  |  | Name: |  |
|  |  |  |  |  |
| Job Title: |  |  | Job Title: |  |
|  |  |  |  |  |
| Telephone: |  |  | Telephone: |  |
|  |  |  |  |  |
| Email: |  |  | Email: |  |
|  |  |  |  |  |
| May we contact referee if shortlisted? |  | May we contact referee if shortlisted? |
| Yes |[ ]  No |[ ]   | Yes |[ ]  No |[ ]

**Declarations**

1. I confirm that the information contained in this Application Form (part 1 and 2) is to the best of my knowledge, true and complete.
2. I agree that any untrue or misleading information will give Central Carers Association the right to terminate any employment contract offered.
3. I understand that this post may require a satisfactory Enhanced Disclosure Certificate from Disclosure Scotland, or an approved umbrella body, or provision of a Protecting Vulnerable Groups Scheme Record/Scheme Record update. If so, an unsatisfactory disclosure or record may lead to the withdrawal of any offer of employment or termination of employment.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |

**Part 2**

For office use only

Applicant No:

|  |  |
| --- | --- |
| Position applied for: |  |

**Important**

**Please do not send a curriculum vitae (CV) with this form or in place of it as it will not be accepted, and your application may not be considered.**

**ADDITIONAL PERSONAL DETAILS**

|  |  |  |
| --- | --- | --- |
| Do you have a current driving licence? | Yes |[ ]  No |[ ]
|  |  |  |  |  |
| Details of any endorsements: |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Do you own or have access to a car? | Yes |[ ]  No |[ ]
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Do you hold a current PVG Scheme record? | Yes |[ ]  No |[ ]

**Digital Skills** (please tick all that you have experience of working with)

|  |  |
| --- | --- |
|[ ]  Office 365 |[ ]  Teams |
|[ ]  Client Databases |  |  |
|[ ]  Other (please specify) |  |

**Relating to the above question, please give specific examples of software you have experience with and how you used it.**

|  |
| --- |
|  |

**Thinking about the post you are applying for, are there any of the above areas where you feel you will require training?**

|  |
| --- |
|  |

**Current or Most Recent Employer**

|  |  |
| --- | --- |
| Name of Employer: |  |
|  |  |  |  |
| Title of Post Held: |  |
|  |  |  |  |
| Length of Service (mm/yy): |  | Notice Required: |  |
|  |  |  |  |
| Leaving Date:(If appropriate) |  | Rate of Pay: |  |
|  |  |  |
|  |  |
| Reason for Leaving: |  |

**Please give a brief description of your main duties and responsibilities, relevant to the post applied for, and what you consider to be your main achievements while carrying out this role.**

|  |
| --- |
| (Max 200 words) |

**Previous, relevant work experience in the last 3 years, either paid or unpaid.**

|  |  |  |
| --- | --- | --- |
| **Employer** | **Position Held** | **Duration of Employment (mm/yy)** |
|  |  |  |

**Suitability for the Post**

Please use this space to evidence how you match the skills, knowledge and experience required for the post, as outlined in the role profile. This is an opportunity to draw attention to aspects of your education (including relevant qualifications), career, interests etc., relevant to this role.

|  |
| --- |
| Skills (max 200 words): |

|  |
| --- |
| Knowledge (max 200 words): |

|  |
| --- |
| Experience (max 200 words): |

Thank you for completing this application form. The information you give us in this form will be treated in the strictest confidence.

Please return your completed application form by email to:

recruitment@centralcarers.co.uk

or by post to:

**PRIVATE AND CONFIDENTIAL**

**FAO RECRUITMENT TEAM**

**Central Carers Association**

**1a Bank Street**

**Falkirk**

**FK1 1NB**

**This page**

 **has deliberately**

**been left blank**

**Central Carers Association**

For office use only

Applicant No:

**Criminal Convictions Declaration**

**Strictly Private and Confidential – Central Carers Association would like to assure applicants that this page will be detached from the Application Form before short-listing takes place.**

|  |  |
| --- | --- |
| Position applied for: |  |

Please note below any criminal convictions except those ‘spent’ under the Rehabilitation of Offenders Act 1974.

If the post you have applied for requires a Protecting Vulnerable Groups Scheme Record, this will be detailed in the Application Pack**. This means Central Carers Association is exempt from the Rehabilitation of Offenders Act 1974 and all criminal convictions, either spent or unspent, must be disclosed below.**

If appointed, you may also be required to provide us with an Enhanced Disclosure Certificate or PVG Scheme Record/Scheme Record Update.

Although this form will be removed before short-listing, any convictions declared will be given due consideration to determine the applicant’s continued suitability before being invited for interview. **This decision will be based solely on the relevance of the conviction to their ability to carry out the duties of the post.**

**Based on the information provided above, so you have any criminal convictions to declare?**

|  |  |
| --- | --- |
| **Yes** |[ ]  **No** |[ ]

**If ‘Yes’, please give details of any convictions below (continue on a separate page if necessary).**

|  |  |
| --- | --- |
| When did the offence take place? |  |
|  |  |
| What were you charged with? |  |
|  |  |
| What sentence did you receive? |  |
|  |  |
| What were your circumstances at the time?i.e., family, financial etc. |  |
|  |  |
| What have you learned from the experience? |  |
|  |  |
| What is your present situation and your future expectations? |  |

**Declaration**

I certify that all information contained in this form is true and correct to the best of my knowledge and I understand that false information or omissions may lead to withdrawal of any offer of employment or dismissal.

|  |  |
| --- | --- |
| Name: |  |
|  |  |  |  |
| Signed: |  | Date: |  |

**This page**

 **has deliberately**

**been left blank**

**Central Carers Association**

For office use only

Applicant No:

**Equal Opportunities Form**

**Strictly Private and Confidential – Central Carers Association would like to assure applicants that this page will be detached from the Application Form before short-listing takes place.**

|  |  |
| --- | --- |
| **Position applied for:** |  |

Central Carers Association is an equal opportunities employer. The aim of our policy is to ensure that no applicant or employee receives less favourable treatment because of age, disability, gender reassignment, marriage and civil partnership, pregnancy or maternity, race, religion or belief, sex, or sexual orientation.

Our selection criteria and procedures are frequently reviewed to ensure that individuals are selected, promoted, and treated based on their relevant merits and abilities and that no applicant or employee is disadvantaged by provisions, criteria or practices which cannot be shown to be justified.

To ensure that this policy is fully and fairly implemented and monitored, and for no other reason, please provide the following information.

**I identify as:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Male |[ ]  Female |[ ]  Trans |[ ]  Intersex |[ ]  Non-binary |[ ]  Prefer not to say |[ ]
| Other (please specify) |  |

**I would describe my ethnic group as:**

**White**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| English |[ ]  Irish |[ ]   Scottish |[ ]  Welsh |[ ]  Prefer not to say |[ ]
| Other white background (please specify) |  |

**Mixed**

|  |  |  |  |
| --- | --- | --- | --- |
| White & Black Caribbean |[ ]  White & Black African |[ ]  White & Asian |[ ]  Prefer not to say |[ ]
| Other Asian background (please specify) |  |

**Asian, Asian British, Asian English, Asian Scottish, Asian Welsh**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Indian |[ ]  Bangladeshi |[ ]  Pakistani |[ ]  Chinese |[ ]  Prefer not to say |[ ]
| Other Asian background (please specify) |  |

**Black, Black British, Black English, Black Scottish, or Black Welsh**

|  |  |  |  |
| --- | --- | --- | --- |
| Caribbean | ☐ | African |[ ]  Prefer not to say |[ ]
| Other black background (please specify) |  |

|  |  |
| --- | --- |
| **Name:** |  |
|  |  |  |  |
| **Signed:** |  | **Date:** |  |