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| C:\Users\Craig\Pictures\Gateway Final JPEG LOGO.jpg  Job Application Form  Please do not submit CV’s  Canvassing of directors or employees in connection with an appointment will  disqualify the applicant. |

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| Title of post applied for: |  | Job Ref: | HO1/16/001 |

Before completing this form, please read the accompanying guidance notes. Please write clearly in black ink or type.

### Confidential

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| **1. PERSONAL DETAILS** (BLOCK CAPITALS PLEASE)   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Surname: | |  | | | Initials: |  | | Former surnames if different: | |  | | | Preferred Name or Title (Optional): |  | | Address: | | | | | Tel No (home): |  | | Tel No (business): |  | |  | | | | | Tel No (mobile): |  | |  | | |  | | Fax No: |  | | E-Mail address: | | |  | | Nat. Insurance No: |  | | Nationality: |  | | | If you are not a European Citizen, or you do not have the permanent right to remain in the U.K., you will require a work permit. | | | | Do you need a work permit to be employed in the UK? | | | Yes  No | If you already have a work permit, when does it expire?  (Please note that your current work permit may not be valid for this post.) | | | | Where did you learn of the post? | | | |  | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Preferred work arrangements: | Full-time | Part-time | Relief | Other | |

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| **2. EDUCATION AND PROFESSIONAL QUALIFICATIONS**  (Original documents as proof of qualification will be required at interview.)   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Secondary School / College / University | Dates | | Examinations taken | Date | Result | | From | To | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |

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| |  | | --- | | Professional Qualifications currently held: how obtained, grade and date |  |  | | --- | | Other relevant Educational or Training Courses, with dates | |

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| **3. PRESENT POST**   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Title of Post: |  | | | Salary/Grade: | |  | | Name of Employer: |  | | | Business of Employer: | |  | | Address: | | | | Date Commenced: | |  | | Date Ended (if applicable): | |  | |  | | | |  | |  | |  | |  | |  | |  | | Please outline your responsibilities, to whom you are responsible and staff responsible to you (if applicable): | | | | | | | | Reason for leaving or wishing to leave: | | |  | | | | | Period of notice required to terminate present employment: | | | | |  | | | Please notify us of any dates you are available for interview: | | | | | | | |

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| **4. PREVIOUS EMPLOYMENT**  (Please use continuation sheet if necessary.)   |  |  |  |  | | --- | --- | --- | --- | | Name and Address of Employers | Position held | Reason for leaving | Final grade/salary | | |  |  |  |  | | Description of duties: | | | | |  | | | | |  |  |  |  | | Description of duties: | | | | |  | | | | |  |  |  |  | | Description of duties: | | | | |  | | | | |  |  |  |  | | Description of duties: | | | | |  | | | | | Have you had any material gaps in your employment? If yes, please provide relevant details: | | | | |

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| 5. RELEVANT SKILLS, ABILITIES, KNOWLEDGE, EXPERIENCE AND YOUR REASONS FOR APPLYING FOR THIS JOB |
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| **6. OTHER INFORMATION**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | What activities outside work interest you? (State any positions held you consider relevant.) | | | | | | Do you hold a curent driving licence? | Yes  No | Do you own a car? | | Yes  No | |  | | | | | | Disability Discrimination Act 1995 | | | | | | Do you consider yourself to be disabled under the Disability Discrimination Act? | | | Yes  No | | | If Yes, are there any adjustments that you think we could make to overcome a disability in relation to the essential requirements of this job? | | | Yes  No | | | If Yes, please provide further details: | | | | | | If selected for interview, do you require any assistance/adaptations to help you attend? | | | Yes  No | | | If Yes, what assistance/adaptations do you require? | | | | |  |  |  | | --- | --- | | Rehabilitation of Offenders Act 1974 | | | Have you any convictions that are not spent under Rehabilitation of Offenders Act? | Yes  No | | If Yes, please provide further details: | | |

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| **7. REFERENCES**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | Referee 1 | | | | Referee 2 | | | | | Title (Mr, Mrs etc): |  | | | Title (Mr, Mrs etc): |  | | | | Full Name: |  | | | Full Name: |  | | | | Job Title: |  | | | Job Title: |  | | | | Organisation: |  | | | Organisation: |  | | | | Address: | | | | Address: | | | | |  | | | |  | | | | |  | |  | |  | |  | | | Tel No: |  | | | Tel No: |  | | | | E-mail address: |  | | | E-mail address: |  | | | | Fax No: |  | | | Fax No: |  | | | | Please state if we may obtain this reference prior to interview. | | | Yes  No | Please state if we may obtain this reference prior to interview. | | | Yes  No | |

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| **8. DECLARATION**   |  |  |  |  | | --- | --- | --- | --- | | I declare that the information given in this application form is true and complete. I understand that if I have given any misleading information on this form or made any omissions, this will be sufficient grounds for terminating my employment. | | | | | Signature: |  | Date: |  | | Name: |  |  | | | The information provided by you on this form as an applicant will be stored either on paper records or a computer system in accordance with the Data Protection Act 1998 and will be processed solely in connection with recruitment. | | | | |

**PLEASE RETURN COMPLETED FORMS TO:**

JOANNA GRACZYKOWSKA

BUSINESS ADMINISTRATOR

GATEWAY

57 CHURCH STREET,

INVERNESS

IV1 1DR

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| GATEWAY  EQUAL OPPORTUNITY & DIVERSITY POLICY  Recruitment Monitoring Form |

|  |  |
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| Job Ref: |  |

In compliance with our Equal Opportunity & Diversity Policy, we are monitoring job applications to make sure discrimination on the grounds of sex, sexual orientation, gender reassignment, race, ethnic origin, religion, marital status, age and disability do not occur . We would be grateful if you would complete and return this form with your employment/job application form.

### Confidential

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| --- | --- | --- | --- | --- | --- |
| **1. Gender** | Male  Female | | | | |
|  | | | | | |
| **2. Preferred Title** | Miss  Ms | Mr  Dr | | Mrs  Other: | |
| **F****ull Name** |  | | | | |
|  | | | | | |
| **3. Marital Status** | Married  Divorced | Single  Widowed | | Separated  Other: | |
|  | | | | | |
| **4. Ethnic Origin** | Scottish  Caribbean  Chinese | Irish  Asian  Mixed | | Other U.K.  African  Other: | |
|  | | | | | |
| **5. Disability** | Do you consider yourself to be disabled under the Disability Discrimination Act?  (The Disability Discrimination Act (1995) defines disability as “a physical or mental impairment which has a substantial and adverse effect on a person’s ability to carry out day to day activities”.) | | | | Yes  No |
|  | If yes, what is the nature of your disability? *(optional)* | |  | | |
|  | | | | | |
| **6. Age Range** | 16 - 24  45 - 54 | 25 - 34  55 - 64 | | 35 - 44  65+ | |

The information you have provided here will stored either on paper records or a computer system in accordance with the Data Protection Act 1998 and will be used solely to monitor the diversity of Gateway HHT recruitment regarding Equal Opportunity issues.

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| GATEWAY HHT  CONVICTIONS FOR CRIMINAL OFFENCES | | | | | | |
| Post applied for: | | | | | | |
| Surname: | | | | Forename(s) | | |
| Other Name(s):  (by which you are/have been known, including maiden name) | | | | | | |
| Place of Birth: | | | | | | |
| Current Address: | | | | | | |
|  | | | | Post Code: | | |
|  | | | | | | |
| Previous Address: | | | |  | | |
| 1. | | |  | 2. | | |
|  | Post Code | |  |  | Post Code | |
| From: | To: | |  | From: | To: | |
| The nature of the duties of the post for which you have applied requires confirmation that you have had no convictions for offences which would reflect upon your suitability for appointment. You should therefore detail below any previous convictions for criminal offences. Subject to the provisions of the Rehabilitation of Offenders Act, 1974, failure to disclose a relevant conviction will be classed as gross misconduct and will result in dismissal.  It should be noted that:  “By virtue of the Rehabilitation of Offenders Act, 1974 (Exceptions) Order, 1975, as amended by the **Amendment Order 1986, does not apply tot he undernoted question. YOU ARE THEREFORE NOT ENTITLED TO WITHHOLD INFORMATION ABOUT A PREVIOUS CONVICTION ON THE GROUNDS THAT IT IS FOR OTHER PURPOSES “SPENT” UNDER THAT ACT.** | | | | | | |
| Have you ever been convicted of any crime? | | | | Yes\* | No | |
| \*If YES, give particulars as follows: | | | |  | | |
| Court at  Which Convicted | | Date of  Conviction | | Details of  Conviction | | Sentence  Imposed |
|  | |  | |  | |  |
| Are there any criminal proceeding pending against you? Yes\* No  \*If YES, give details: | | | | | | |
| I hereby consent to Gateway HHT arranging for a check to be carried out against Police records.  Signature: Date: | | | | | | |

**Please note that successful applicants will be required to complete a Disclosure Scotland Application**