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| Job Application Form |

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| Title of post applied for: |  |

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:  |       | First Name:  |       |
| Address:      | Tel No (home): |       |
| Tel No (mobile): |       |
| E-Mail address: |       |
| 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 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Preferred hours of working: | [ ]  Morning  | [ ]  afternoons | [ ]  evenings | [ ]  Overnights |

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| --- | --- | --- | --- |
| Do you hold a current driving license? | [ ]  Yes [ ]  No | Do you own a car? | [ ]  Yes [ ]  No |

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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 | Subject Qualifications | Date | Result |
| From | To |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |

 Other relevant Educational or Training Courses, with dates

|  |  |  |  |
| --- | --- | --- | --- |
| Course Title | Training Provider | Date | Result |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

**3. PRESENT POST**

|  |  |  |  |
| --- | --- | --- | --- |
| Title of Post:  |       | Salary/Hourly Rate:  |       |
| Name of Employer:  |       | Business of Employer:  |       |
| Address:                | Date Commenced:  |       |
| Date Ended (if applicable): |       |
| Notice Period: |       |
| Reason for leaving or wishing to leave: |       |
| Please outline your responsibilities, to whom you are responsible and staff responsible to you (if applicable): |
| 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/ **HOW LONG** | Reason for leaving | Salary/ hourly rate |
|
|  |       |       |       |
| 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.** 150 words minimum

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| **7. REFERENCES (ONE HAS TO BE THE MOST RECENT/CURRENT EMPLOYER – LINE MANAGER)** If you have worked in the care sector then you must also provide a reference from this employer**.**

|  |  |
| --- | --- |
| 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:  |       |
| 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**

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| 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 GDPR Act 2018 and will be processed solely in connection with recruitment. If you are unsuccessful in this application, we will keep this form on file for 6 months should you wish to be considered for other vacancies within Gateway? |

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

Thank you for completing the application form. Please return this document to:

**Recruitment, Gateway, David Whyte House, 57 Church Street, Inverness. IV1 1DR**

Alternatively, you may email the completed application form to: **recruitment@homelesstrust.org.uk**