

Application Form



Please return completed forms to:

Archway (Respite Care & Housing) Ltd
71 Westburn Road
Aberdeen
AB25 2SH
Tel: 01224 643327
Email: admin@archway.org.uk

Please complete ALL sections of this form clearly in black ink

Position applied for:

Where did you find out about this vacancy?

1. Personal Information

Name			
Surname			
Previous names			
Address			
Post Code			
Email Address:			
Telephone (Home)			
Mobile			
Contact details if different from above			
If you are offered this position do you intend to work in any other job? Yes / No If yes please provide full details			
National Insurance number:			
Are you eligible to work in the UK?	Yes <input type="radio"/>	No <input type="radio"/>	
Are you subject to immigration control?	Yes <input type="radio"/>	No <input type="radio"/>	

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2. Academic and/or Vocational Qualifications					
Secondary Schools / Further Education and awarding body if relevant	Qualifications Gained			Date awarded	
3. Professional Membership or Registration					
Are you currently registered with the SSSC (or equivalent regulatory body eg NMC)				Yes / No If yes provide details below	
Registration Number:				Expiry Date:	
Are there any conditions applied to your current registration? If yes provide details:					
If you have been previously registered and are not anymore please provide reasons:					
4. Full Employment History since leaving Secondary Education					
a) Please give details of your present or most recent employment:					
Employer's Name and Address	From	To	Post/Title	Salary	Notice Required
Please provide a brief summary of your duties: (continue on separate sheet if necessary)					
Please provide reason(s) for leaving/wishing to leave:					

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b) Please provide details of all previous employment (with most recent first) since leaving full-time education. This information should also include any part-time/voluntary work. Please note that we require a full employment history with dates. Continue on a separate sheet if necessary.

Employers Full name and address	Dates	Post / Title	Brief summary of duties/main responsibilities	Reason for leaving

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c) Please use this space to explain any gaps you have in your employment history

5. References

Please provide names, addresses and designations of two people who are currently in a position to comment on your suitability for this position.

At least one reference must be **from/on behalf of your current or most recent employer from their business address**. If you are not currently working with vulnerable people and you have done so in the past you should provide details of the employer to enable us to request a reference from them. References will not be accepted from relatives or from people writing solely in the capacity of friends.

Name		Name	
Position / Designation in company		Position / Designation in company	
Company Name		Company Name	
Full Business Address		Full Business Address	
Relationship to you		Relationship to you	
Tel. No.		Tel. No.	
Email		Email	

As a prospective employer we may contact any former employer in addition to the referees nominated by you. Failure to disclose important information may lead to dismissal if disclosed at a later date.

Please provide any times/dates when it may not be possible for you to come for an interview. We will try to take this into account when setting the interview date

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6. Additional Information

Please tell us why you have applied for this post and support your application by describing how you meet the person specification by providing details of relevant experiences, knowledge, skills and abilities. You should also include examples of when you have demonstrated these skills. (continue on a separate sheet if necessary)

[Empty response area for providing details of relevant experiences, knowledge, skills and abilities.]

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7. Protecting the Vulnerable by Safer Recruitment

Preferred candidates for posts conducting “Regulated Work” with children and adults as defined by the Protecting Vulnerable Groups Act 2007 will be required to join the Scheme if not already a member.
 For non-regulated work arrangements will be made for prospective candidates to apply for an appropriate certificate from Disclosure Scotland.
 If you are already a PVG scheme member then please enter your membership details below:

PVG Membership Number :	Are you a PVG Member for regulated work with children / adults or both
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As part of our safer recruitment procedures you are required to disclose all convictions (spent and unspent), cautions and any other relevant non-conviction information

Please answer YES or NO to the following by circling the appropriate response

Have you ever been convicted of an offence in any criminal proceedings in any Court of the United Kingdom or elsewhere?	YES / NO
Are you on the disqualified from Working with Children or Adults List	YES / NO
Are you on any other equivalent list in another UK jurisdiction	YES / NO
Are you subject to sanctions imposed by a regulatory body, eg the SSSC	YES / NO
Do you have any convictions or cautions, including those which may be regarded as being “spent”?	YES / NO
Are you involved in any disciplinary or grievance procedures at present & do you have any ‘live’ formal warnings.	YES / NO

If you have answered yes to any of the above questions please provide details in a sealed envelope marked “confidential” and enclose with your application form.

Declaration

By signing this form I declare that the information supplied by me is to the best of my knowledge true and accurate and I understand Archway reserves the right to withdraw any offer or terminate my employment if it is found to be false.

I understand that all initial offers of employment are conditional eg. subject to satisfactory pre-employment checks, medical evidence and the eligibility to work in the UK.

I have read and understood the information contained in the Information for Applicants.

Signature	
Date	

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Diversity Monitoring Form

Archway is committed to equal opportunities. To assist in the successful implementation and monitoring of our equal opportunities policy, you are requested to provide the information below. The information you provide will be treated in the strictest confidence. This form will be separated from your application and stored separately with no identifying information.

Please complete this form by placing a tick in the box that best applies to you in each area.

Position applied for:	
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1. Gender: Male Female

2. Do you consider yourself to have a disability? Yes No

3. What is your age?

Age:	16-20		21-30		31-40		41-50		51-60		61-65	
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4. What is your ethnic group (*Please tick one box*)

White (UK)	
White (Other)	
Black African	
Black Caribbean	
Black (Other)	
Chinese	
Indian	
Pakistani	
Bangladeshi	
Other	