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Application for Employment

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| --- |
| Post Applied For: Please enter post title |

Personal details

|  |  |  |
| --- | --- | --- |
| Title:  Please select title  If other, please specify: Please specify | | |
| Surname  Please enter surname | First name(s)  Please enter first name(s) | |
| Address  Please enter address | | |
|  | | What is your preferred method of communication?  Please select preferred method |
| Email  Please enter email | | Tel no (mobile)  Please enter mobile number |
| Tel no (day) May we call you during the day?  Yes  No | | Tel no (home)  Please enter home number |
| Are you a British Citizen?  Yes  No | | Do you have the right to work and live in the UK without restriction?  Yes  No |
| Where did you see the post advertised?  Please enter where you found the post advertised | |  |

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| **Additional requirements/adjustments** |
| If you are invited to attend an interview, do you have any special requirements/adjustments?  Yes  No  If you answered yes, please provide details below:  Please provide details |

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| Education and Qualifications |

a) Further/higher education/professional qualification(s) currently being undertaken

|  |  |  |  |
| --- | --- | --- | --- |
| Qualification/Level | Subject(s) and method of study  (e.g., full-time, part time, distance learning) | Exam/end date | Institution/provider |
| Qualification/Level  Qualification/Level  Qualification/Level. | Subjects and method of study  Subjects and method of study  Subjects and method of study | Date  Date  Date | Institution / Provider  Institution / Provider  Institution / Provider |

b) Completed further and higher education and professional qualifications, giving highest qualification first. If period of study was longer than normal to obtain the qualification, explain (e.g., part-time study)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Period of study | | Academic qualification(s) | Subject(s) | Level/grade | Institution/Provider |
| From  D/M/Y | To  D/M/Y |
| Date  Date  Date  Date | Date  Date  Date  Date | Qualification  Qualification  Qualification  Qualification | Subjects  Subjects  Subjects  Subjects | Level/Grade  Level/Grade  Level/Grade  Level/Grade | Institution/Provider  Institution/Provider  Institution/Provider  Institution/Provider |

c)Secondary education

|  |  |  |
| --- | --- | --- |
| Qualification(s) | Subjects | Level/grade |
| Qualification  Qualification  Qualification  Qualification  Qualification | Subjects  Subjects  Subjects  Subjects  Subjects | Level/Grade  Level/Grade  Level/Grade  Level/Grade  Level/Grade |

Current or latest work experience

|  |  |  |
| --- | --- | --- |
| Name and address of employer  Please enter name and address | | |
| Position held  Please enter position | From (D/M/Y)  Date From | To (D/M/Y)  Date To |
| Notice required  Notice Period | If p/t, state hours per week/ weeks per year  Hours per week / weeks per year | |
| Reason for leaving or wishing to leave current/last employment  Please state the reason | | |
| Please summarise your current duties and responsibilities  Please insert summary | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Previous work experience  List your experience in order, beginning with the most recent | | | |
| Dates of employment | | Name of employer  (Include nature of business) | Job title, main role(s), and reason for leaving  Please indicate if post is full or part time. If part-time, give % full time (e.g 0.5) |
| From  (D/M/Y) | To  (D/M/Y) |
| Date from | Date to | Name of employer | Job title, main role, reason for leaving |
| Date from | Date to | Name of employer | Job title, main role, reason for leaving |
| Date from | Date to | Name of employer | Job title, main role, reason for leaving |
| Date from | Date to | Name of employer | Job title, main role, reason for leaving |
| Date from | Date to | Name of employer | Job title, main role, reason for leaving |
| Date from | Date to | Name of employer | Job title, main role, reason for leaving |
| Date from | Date to | Name of employer | Job title, main role, reason for leaving |

Supporting Statement

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| Insert supporting statement here |

Please provide any further evidence of the extent to which you meet each of the selection criteria included in the personal specifications document.

|  |  |
| --- | --- |
| References  All offers of employment with UHI Argyll are conditional upon receipt of two satisfactory employment references. Please provide two referees, as follows:   * If you are currently in employment your referees must include your current employer. * If you are currently unemployed you must include your most recent employer. * Self-employed applicants should include details of an accountant or someone of a similar, professional standing who can confirm your status as self-employed and verify the dates of the period of self-employment. * FE/HE Education Leavers should include a referee from any part time/temporary employment, confirming the dates of the course/programme.   References not returned within a reasonable time frame could have a detrimental effect on your ability to begin employment | |
| Employer Name  Please select title | Employer Name  Please select title |
| Position: | Position: |
|  |  |
| Address  Please insert address | Address  Please insert address |
| Post code  Please enter postcode | Post code  Please enter postcode |
| Tel no (day)  Please enter telephone number | Tel no (day)  Please enter telephone number |
| Email  Please enter email | Email  Please enter email |
| May we contact this referee prior to interview?  Yes  No | May we contact this referee prior to interview?  Yes  No |
|  |  |

Declaration

I have not canvassed and will not canvass, either directly or indirectly, in connection with the above appointment and I am aware that canvassing will lead to a disqualification.

**I am related to an employee of Argyll College UHI Ltd Yes  No**

**I am related to a member of the Board of Argyll College UHI Ltd**   **Yes  No**

Name of Individual Please enter name

……………………………………………………………………………………………………………………………….

Nature of Relationship Please enter nature of relationship

.……………………………………………………………………………………………………………………………….

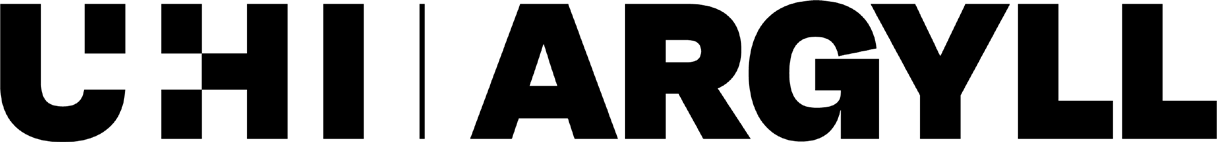
The information on this form will be used in accordance with the Data Protection Act 1998 to consider your application for employment and, if appointed, may be processed by computer, or form the basis of manual records. If used to produce summary statistics, it will not be possible to identify individuals and you consent to the information being used for these purposes.

Providing false or misleading information anywhere on your application will disqualify you from appointment or if appointed will render you liable to dismissal without notice. By signing below, you declare that the information you have given is to the best of your knowledge true and complete.

|  |
| --- |
| Signed: Please type name Date: Insert date |

(Type name if submitting electronically)

**Forms should be emailed to** [**ACHR@uhi.ac.uk**](mailto:ACHR@uhi.ac.uk) **or posted to HR, Glenshellach Business Park, Oban PA34 4RY**

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**Monitoring Form**

**The information on this form will not be divulged to any member of short-listing or interviewing panel.**

We are committed to our equality policy to ensure that all candidates are treated based on their merits and abilities, and that unfair and unlawful discrimination is eliminated. We positively welcome applications from all sections of the community.

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Birth: Insert date | Gender: Male  Female | | Nationality: Insert Nationality |
| **Ethnic Origin: Please tick/highlight one of the choices below:** | | | |
| **White**    British English  British Irish  British Scottish | | British Welsh  British Other (please specify):  Irish  Other White background (please specify): | |
| **Black or Black British**  African  Caribbean  Other Black background: Please specify | | **Asian or British Asian**  Bangladeshi  Chinese  Indian  Pakistani  Other Asian background: Please specify | |
| **Mixed**  White and Black African  White and Black Caribbean  White and Asian  Other mixed background: Please specify | | **Other ethnic background (please specify):**  Please specify | |

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| **Disability** | | | | | | | | | | | | | |
| Disability is defined in the Disability Discrimination Act 1995 as a physical or mental impairment that has a substantial long-term effect on ability to carry out normal day to day activities. ‘Long-term’ is taken to mean lasting for a period longer that 12 months or where the total period is likely to last at least 12 months. Please tick/highlight the choices below as appropriate:  You do not have a disability or special need  Need personal care support  Dyslexia  Mental health difficulties  Blind/partially sighted  Other unseen disability, e.g., diabetes, epilepsy, asthma  Deaf/hearing impaired  Disability or special need not listed above  Wheelchair user/mobility difficulties  Please specify  Disabled candidates who meet the essential criteria will be contacted to discuss any support needed during the selection programme and employment. | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **PUBLIC SECTOR EQUALITY DUTY INFORMATION – *Protected Characteristics***  **Sexual Orientation** | | | | | | | | | | | | | |
| **Which one of the following most adequately describes your sexual orientation?** *Please tick* | | | | | | | | | | | | | |
| Gay/Lesbian | |  | | Bisexual | | |  | Heterosexual | |  | | Choose not to disclose |  |
| **Gender re-assignment** | | | | | | | | | | | | | |
| **Trans-sexual status: Do you currently or have you previously considered yourself a trans-sexual person?** *Please tick* | | | | | | | | | | | | | |
| Yes |  | | No | | | |  | Choose not to disclose | | | | |  |
| **Religion or Belief** | | | | | | | | | | | | | |
| **Which of the following religions or belief systems, if any, do you belong to or affiliate with?** *Please tick* | | | | | | | | | | | | | |
| Buddhism | | | | |  | Christianity | | |  | | Hinduism | |  |
| Islam | | | | |  | Judaism | | |  | | Paganism | |  |
| Sikhism | | | | |  | No religion or belief | | |  | | Choose not to disclose | |  |
| Other: Please state | | | | | | | | | | | | | |

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| Are you currently a member of the Disclosure Scotland PVG scheme for working with children?  Yes  No  Have you ever been convicted of a criminal offence which has not become ‘spent’ under the Rehabilitation of Offenders Act 1974? Yes  No |
|  |
| If yes, please give details on a separate sheet. |
|  |
| Argyll College will seek a PVG Disclosure through the Scottish Criminal Record Office Disclosure Service for the successful candidate. |
|  |
| Please read the guidance notes on the link below before making a declaration. |
|  |
| <https://www.mygov.scot/convictions-higher-disclosures/> |

**The development of a comprehensive monitoring system for employees is an essential element of the College’s continued commitment to equality. It is by monitoring, evaluating, setting targets, and taking action that we will be able to progressively implement our Equality Policies.**

***Thank you for taking the time to complete this form.***