

Application Form

Post:

PERSONAL DETAILS

SURNAME:

FIRST NAME(S):

ADDRESS:

HOME TEL NO:

MOBILE:

DAYTIME NO

MAY WE RING YOU AT THIS NUMBER? YES NO

EMAIL ADDRESS

REFEREES

Please give the names and addresses of two people who can comment on your suitability for this post. One of these must be your present or most recent employer.

1 st Referee	_____	2 nd Referee	_____
Name	_____	Name	_____
Position	_____	Position	_____
Organisation	_____	Organisation	_____
Address	_____	Address	_____
	_____		_____
Tel No/Fax	_____	Tel No/Fax	_____

May we contact this referee
before the interview?
Yes/No

May we contact this referee
before the interview?
Yes/ No

In what capacity do these referees know you?

DO YOU HOLD A CURRENT DRIVING LICENCE? YES NO

EDUCATION AND TRAINING

PLEASE A SUMARISE BELOW YOUR EDUCATION, QUALIFICATIONS OR ANY TRAINING COURSES YOU HAVE ATTENDED (IN CHRONOLOGICAY ORDER), WHICH ARE RELEVANT TO THE POST FOR WHICH YOU ARE APPLYING.

DATE	LENGTH OF COURSE	NAME OF COURSE/QUALIFICATION

What attracts you to this position?

CURRENT OR MOST RECENT EMPLOYMENT

Employer _____

Position held _____

Period in post _____ to _____ Salary _____
Notice Period _____

Please give information about your current or most recent post – describe in particular your duties and achievements.

Employment History

Dates Employed	Employer's Name and Address	Job Title and brief description of Main Duties	Reason for Leaving and Salary on Leaving

OTHER RELEVANT EXPERIENCE

Include details of voluntary work, projects undertaken, study, membership of organisations etc.

Additional Information

Please use this section to explain how your previous experience and qualities would enable you to meet the requirements of this post. Please use continuation pages if required and head appropriately.

CANDIDATE'S DECLARATIONS

Criminal Convictions

The Rehabilitation of Offenders Act 1974 allows people who have been convicted of certain criminal offence to regard their conviction as "spent" after the lapse of a period of years. This means that no reference need be made to the conviction or any circumstances relating to it.

Because of the nature of the work for which you are applying, however, this post is exempt from the provisions of the Act and you are, therefore, required not to withhold information about convictions which for other purposes are "spent" under the provisions of the Act. In the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action. Any information given will be completely confidential and will be considered only in relation to an application for positions when such an exception is appropriate.

Have you ever been convicted of a criminal offence? Yes No

If yes, please give details on a separate sheet sealed in an envelope, marked 'private and confidential'. Please note that failure to do so may lead to disqualification or later dismissal if appointed.

Health

To the best of my knowledge there is no reason in respect of my physical or mental health why I should not be able to carry out fully the tasks described for this post.

I confirm that the information I have given on this form is correct and complete and that misleading statements may be sufficient ground for cancelling any agreement made.

Signed:.....**Date:**

On completion of the application form please send it to:

**LIZ CAMPBELL
MAYFIELD AND EASTHOUSES YOUTH 2000 PROJECT
MAYFIELD
DALKEITH,
MIDLOTHIAN
EH22 5DY**

Or by email to:

lizcampbell@youth2000project.com

EQUAL EMPLOYMENT OPPORTUNITIES MONITORING QUESTIONNAIRE

Growing Gardeners and Y2K aims to be an equal opportunities employer and seeks to ensure that no job applicant or employee receives less favourable treatment, particularly on the grounds of gender, race, colour, nationality, ethnic origin, marital status, disability, employment status or HIV status.

Please help us to ensure our equal employment opportunities policy is being carried out by completing and returning this form.

We guarantee to use any information you provide on this form for recruitment monitoring purposes only. The information will be held securely and retained on for as long as necessary. You are under no obligation to complete this form and if you do not complete it, it will not alter the treatment of your application.

PLEASE TICK APPROPRIATE BOXES.

<p>GENDER</p> <p>MALE <input type="checkbox"/> FEMALE <input type="checkbox"/></p>	<p>AGE</p> <p>Up to 24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45 upwards <input type="checkbox"/></p>
<p>DISABILITY</p> <p>Do you consider yourself to have a disability YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>It is recognised that disabled people are not only those whose disability is immediately apparent (e.g. visual impairment or mobility), but also those whose disability is not immediately obvious (e.g. heart trouble, mental illness, diabetes).</p>	
<p>ETHNIC GROUP</p> <p>These categories were used in the 2001 census. Please indicate the one you most closely associate yourself with.</p> <p>White: British <input type="checkbox"/> Irish <input type="checkbox"/> Other White <input type="checkbox"/></p> <p>Mixed: White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/></p> <p>White and Asian <input type="checkbox"/></p> <p>Mixed: White and Other Mixed <input type="checkbox"/></p> <p>Black or Black British: Caribbean <input type="checkbox"/> African <input type="checkbox"/> Other Black <input type="checkbox"/></p> <p>Asian or Asian British: Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/></p> <p>Other Asian <input type="checkbox"/></p> <p>Chinese or Chinese British <input type="checkbox"/> Other ethnic group <input type="checkbox"/></p>	
<p>JOB ADVERTISEMENT</p> <p>Please help us to plan future recruitment by telling us how you found out about the job you are applying for.</p>	
<p>JOB APPLIED FOR:</p>	
<p>APPLICANTS NAME:</p>	

SIGNATURE:

DATE:

DECLARATION B

I verify that, to the best of my knowledge, the information supplied by me on this application form and on any additional sheets is correct. I accept that false information or omission may lead to disciplinary proceeding which could result in dismissal without notice.

Signature:
(initials and surname only)

Date: