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| Please complete in black ink and return to the address shown on the accompanying letter. Since CVs are not accepted, please complete this form in full. |  |

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| Post Details | |
| Job Title |  |
| Name of Service |  |
| Location |  |

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| Applicant Information | | | | | | | | | | | | | | |
| Surname |  | | | | | | | | | | | | | |
| First Name |  | | | | | | | | | | | | | |
| Preferred title – Mr/Mrs/Ms/Miss etc |  | | | | | | | | | | | | | |
| Address |  | | | | | | | | | | | | | |
| City/town |  | | | | | | | | Postcode | | | |  | |
| Phone |  | | | | | | | | E-mail Address | | | |  | |
| Nat Ins No. |  | | | | | | | | | | | | | |
| Health | | | | | | | | | | | | | | |
| Any periods of absence in the past 2 years | | YES☐ | | NO ☐ | | If so, how long? | | | |  | | | | |
| Was this due to illness? | | YES☐ | | NO ☐ | | If yes, explain | | | |  | | | | |
| Has your employment been terminated due to incapacity? | | YES☐ | | NO ☐ | | If yes, explain | | | |  | | | | |
| Rehabilitation of offenders | | | | | | | | | | | | | | |
| This post is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act, 1974. Applicants are therefore under a duty to disclose all convictions, spent or otherwise if applying for work involving coming into contact with drug or alcohol dependents.  You are required to disclose **any** unspent convictions or cautions **and** any spent convictions for offences included in Schedule A1, ‘OFFENCES WHICH MUST ALWAYS BE DISCLOSED’ of the Rehabilitation of Offenders Act (Exclusions and Exceptions) (Scotland) Amendment Order 2015 No.2. Candidates are **not** required to disclose spent convictions for offences included in Schedule B1, ‘OFFENCES WHICH ARE TO BE DISCLOSED SUBJECT TO RULES’ until such time as they are included in a higher level disclosure issued by Disclosure Scotland.  These lists of offences are available on the Disclosure Scotland website or at www.legislation.gov.uk.    Enhanced PVG checks will be requested for any position with Abbeycare.    Having a criminal record will not necessarily bar you from working with us. This will depend on  the nature of the position and the circumstances and background of your offence(s). | | | | | | | | | | | | | | |
| Have you ever been convicted or found guilty by a Court of any offence in any country (excluding parking but including all motoring offences even where a spot fine has been administered by the police) or have you ever been put on probation (probation orders are now called community rehabilitation orders) or absolutely/conditionally discharged or bound over after being charged with any offence or is there any action pending against you? You need not declare convictions that are “spent” under the Rehabilitation of Offenders Act (1974). | | | YES☐ | | NO ☐ | | If yes, explain | | | | | | |  |
| Have you ever been convicted by a Court Martial or sentenced to detention or dismissal whilst serving in the Armed Forces of the UK or any Commonwealth or foreign country? You need not declare convictions that are “spent” under the Rehabilitation of Offenders Act (1974). | | | YES☐ | | NO ☐ | | If yes, explain | | | | | | |  |
| Do you know of any other matters in your background that might cause your reliability or suitability to have access to vulnerable adults or their records to be called into question? | | | YES☐ | | NO ☐ | | If yes, explain | | | | | | |  |
| Education | | | | | | | | | | | | | | |
| High School |  | | | Dates | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
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| Subjects |  | | | Qualifications | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
| Education | | | | | | | | | | | | | | |
| University/College or other |  | | | Dates | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
| University/College or other |  | | | Dates | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
| University/College or other |  | | | Dates | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
| University/College or other |  | | | Dates | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
| University/College or other |  | | | Dates | |  | | | | | | | | |
| Subjects |  | | | Qualifications | |  | | | | | | | | |
| Please provide anymore qualification on a separate document and attach to the application form. | | | | | | | | | | | | | | |
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| References | | | | | | | | | | | | | | |
| Please give name, address and occupation of two referees who know you in a work capacity, one of whom must be your current employer (or last employer) if you are not currently in work. These referees must not be related to you.  Abbeycare Scotland will only take up references if a post is offered.  If you have not been previously employed, please give the names of two people who can provide character references | | | | | | | | | | | | | | |
| Referee 1 |
| Full Name |  | | | | | | | Relationship | | | |  | | |
| Company |  | | | | | | | Phone | | |  | | | |
| Address |  | | | | | | | Email | | |  | | | |
| Referee 2 |
| Full Name |  | | | | | | | Relationship | | | |  | | |
| Company |  | | | | | | | Phone | | |  | | | |
| Address |  | | | | | | | Email | | |  | | | |

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| Previous Employment (covering last 5 years) | | | | | | | | | | | | | | | | | | |
| Company | | |  | | | | | | | | Phone |  | | | | | | |
| Address | |  | | | | | | | | | Supervisor | |  | | | | | |
| Job Title | |  | | | | | | | Starting Salary | |  | | | Ending Salary | | | |  |
| Responsibilities | | | |  | | | | | | | | | | | | | | |
| From |  | | | To | |  | | Reason for Leaving | |  | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | YES☐ | NO☐ |  | | | | | | |
| Company | | |  | | | | | | | | Phone |  | | | | | | |
| Address | |  | | | | | | | | | Supervisor | |  | | | | | |
| Job Title | |  | | | | | | | Starting Salary | |  | | | Ending Salary | | | |  |
| Responsibilities | | | |  | | | | | | | | | | | | | | |
| From |  | | | To | |  | | Reason for Leaving | |  | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | YES☐ | NO☐ |  | | | | | | |
| Company | |  | | | | | | | | | Phone |  | | | | | | |
| Address | |  | | | | | | | | | Supervisor | |  | | | | | |
| Job Title | |  | | | | | | | Starting Salary | |  | | | Ending Salary | | | |  |
| Responsibilities | | | |  | | | | | | | | | | | | | | |
| From |  | | | To | |  | | Reason for Leaving | |  | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | YES☐ | NO☐ |  | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Company | |  | | | | | | Phone |  | | | | | Address | |  | | | | | | Supervisor | |  | | | | Job Title | |  | | | | Starting Salary | |  | | | Ending Salary |  | | Responsibilities | | |  | | | | | | | | | | | From |  | | To |  | Reason for Leaving | |  | | | | | | | May we contact your previous supervisor for a reference? | | | | | | | YES☐ | NO☐ |  | | | | |  | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | | | | | |
| Membership of professional bodies/association/regulatory bodies (BACP etc) | | | | | | | | | | | | | | | | | | |
|  | | Name of professional body/association/regulatory body | | | | | | | | | | | From | |  | To |  | |
|  | | | | |  | | | | | | | |  | | | | |  |
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| Disclaimer and Signature | | | | | | | | | | | | | | | | | | |
| Please state your reasons for applying and detail any skills and experience relevant to your application for this post. Please make sure you can highlight your experience, knowledge and skills related to the Job specification attached. | | | | | | | | | | | | | | | | | | |
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| **Disclaimer and Signature** | | | |
| Do you have a relative employed by Abbeycare (UK) Ltd? Yes ☐ No☐  I declare that the information I have given is, to the best of my knowledge and belief, true and complete. Understand and accept that any false statement may disqualify me from appointment or render me liable for dismissal. I consent to all the information contained in this application and diversity monitoring form being gathered and processed by the organisation. I have completed the application in full and understand that CVs are not accepted. | | | |
| Signature |  | Date |  |
| **Equal Opportunities Monitoring (Strictly Confidential)** | | | |
| Abbeycare (UK) Ltd is an equal opportunities employer and does not discriminate on the grounds of sex, colour, race, ethnic origin, national origin, marital status, disability, age, sexual orientation, religion or belief (Unless a genuine occupational requirement applies).  In order to help Abbeycare ensure its equal opportunities policy is carried out would you please provide the information requested below, which will be kept in strictest confidence separate from your application form.  The information you provide on this form will be held and processed, electronically and manually, by the Human Resources Dept and will be treated in the strictest confidence. The aim of the organisation is to comply fully with the Data Protection Act 1998.  Please tick box relevant to you: | | | |
| Nationality: British ☐ EU National ☐  Other ☐ (Please specify)  Ethnic Origin: White ☐ Black-Caribbean ☐ Black-African ☐ Black-Other ☐  Indian ☐ Pakistani ☐Chinese ☐ Mixed Race ☐  Other ☐ (Please specify)  Religion: Christian ☐ Jewish ☐ Muslim ☐ Hindu ☐  Sikh ☐ Buddhist ☐  Other ☐ (Please specify) ...........................................................................  Age: 16-19 ☐ 20-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ 60+ ☐  Gender: Female ☐ Male ☐ Transgender☐  Sexual Orientation: Heterosexual ☐ Homosexual ☐ Bisexual ☐ Prefer not to say ☐  Are you registered disabled? Yes ☐ No☐ | | | |