

**Application Form**

*(please complete in black ink or type)*

*Applicants should understand that any false statements or omissions will lead to disqualification of application or dismissal if appointed.*

**Post Applied for: Sessional worker**

**Closing Date: Open**

**Personal Details:**

Surname:

Other Names:

Date of Birth:

Address:

Postcode:

Telephone:

Email:

I declare that I have the legal right to live and work in the UK. Yes No

*(Please tick box as appropriate)*

**Signed: Date:**

*Please return completed and signed application form to:*

**Edinburgh Young Carers**

**Norton Park, 57 Albion Road**

**Edinburgh EH7 5QY**

**References:**

Please give the names of **three** referees who can provide reliable current information about the experience, skills and qualifications which make you suitable for this post. One must be your present or last employer.

**Name:**

**Occupation:**

**Address:**

**Post Code:**

**Telephone:**

**Relationship to applicant:**

**May we approach this referee before interview? Yes / No**

**Name:**

**Occupation:**

**Address:**

**Post Code:**

**Telephone:**

**Relationship to applicant:**

**May we approach this referee before interview? Yes / No**

**Name:**

**Occupation:**

**Address:**

**Post Code:**

**Telephone:**

**Relationship to applicant:**

**May we approach this referee before interview? Yes / No**

***Please Note:*** *No appointment will be made without taking up references*

*This page and the front page will be removed before the short listing process. This approach is designed to ensure equality of opportunity in line with Edinburgh Young Carers’ Equal Opportunities Policy.*

**Supporting Statement**

Please state below your reason for applying for the post and the **qualities and experience** that you consider to make you a suitable applicant. **Please refer to the person specification when completing this statement.** Your statement need not be lengthy. A typed statement can be attached to this page.

**Current Employment**

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|  |  |
| --- | --- |
| **Name & address of current / most recent Employer** |  |
| **Date from** |  |
| **Date to** |  |
| **Role Description** |  |
| **Salary** |  |
| **Reason for leaving** |  |

**Relevant Experience**

Please list all relevant paid and non-paid experience (use continuation sheets if necessary)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name & address of Employer / Organisation** | **Dates from** | **Dates to** | **Role description** | **Reason for leaving** |
| **Paid:** |  |  |  |  |
| **Unpaid:** |  |  |  |  |

**Relevant Qualifications and Training:**

Please list below any relevant qualifications (use continuation sheet if necessary)

|  |  |  |  |
| --- | --- | --- | --- |
| **Qualifications** | **Name & address of Awarding Body** | **Grade** | **Date of Award** |
|  |  |  |  |

Please list below any courses/seminars which are relevant, including current studies (use continuation sheet if necessary)

|  |  |  |  |
| --- | --- | --- | --- |
| **Course** | **Name & Address of Course Provider** | **Duration** | **Dates** |
|  |  |  |  |

Do you hold a current driving licence?  **Yes / No**

Please describe below your level of computer skills:

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| --- |
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| --- | --- | --- |
| **Other languages** | **Spoken** | **Written** |
|  |  |  |

**Health:**

Are there any reasonable adjustments you need us to make for the interview process?

**Yes / No**

If yes, please describe:

|  |
| --- |
|  |
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|  |

**Rehabilitation of Offenders Act:**

Have you ever been convicted of any criminal offence (See note below before answering)

**Yes / No**

If yes, please provide details:

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| --- |
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Note: If the post for which you are applying is exempt from the provisions of the Act, which will be clearly indicated in the job outline, any convictions, even if they would otherwise be regarded under the Act as ‘spent’ must be disclosed. Any failure to disclose such offences will result in dismissal. No consideration will be taken of any convictions which are not relevant to the job.