



SCA - Job Application Form

Title of post applied for:

Job Ref:

Confidential

Personal Details

Surname:

First Names:

Former surnames if different:

Preferred Name or Title (Optional)

Address:

Tel No - Home:

Tel No - Business:

Postcode:

Tel No - Mobile:

E-Mail address:

Fax No:

Nationality:

National Insurance No:

If you are not a British passport holder or a European Citizen, or you do not have the permanent right to remain in the UK, you will require a work permit.

Do you need a work permit to work in the UK?

Yes

No

If you already have a work permit, when does it expire?

(Please note that your current work permit may not be valid for this post)

Where did you learn of the post?

Preferred work arrangements:

Full-time

Job share

Term time only

Part Time

Education and Professional Qualifications

(Original documents as proof of qualification will be required at interview.)

Secondary School / College / University	Dates		Examinations taken	Date	Result
	From	To			

Professional Qualifications currently held: how obtained, grade and date

Professional Registrations currently held, date of registration, expiry date, registration number and any conditions which have been attached.

Other relevant Educational or Training Courses, with dates

Present Post

Title of Post:

Salary/Grade:

Name of Employer:

Business of Employer:

Address:

Date Commenced:

Date Ended (if applicable):

Postcode:

Reason for leaving or wishing to leave: :

Please outline your responsibilities, to whom you are responsible and staff responsible to you (if applicable):

Period of notice required to terminate present employment:

Please tell us of any dates you are unavailable for interview:

Previous Posts

Name and Address of Employers	Position held Date from and to	Reason for leaving	Final grade/ salary	Description of duties

If you have had any material gaps in your employment then please provide relevant details:

Relevant skills, abilities, knowledge, experience and your reasons for applying for this job

Other Information

What activities outside work interest you? (State any positions held you consider relevant.)

Do you hold a current driving licence? Yes No Do you own a car? Yes No

Health

Please state the number of days sickness absence in the last 2 years:

NB: Successful candidates will be required to complete a full medical questionnaire and supply a medical reference.

Disability Discrimination Act 1995- Social Care Alba offers a guaranteed interview to any applicant who considers him/herself to be disabled and who meets the minimum essential requirements for the post.

Do you consider yourself to be disabled under the Disability Discrimination Act?: Yes No

If Yes, are there any adjustments that you think we could make to overcome a disability in relation to the essential requirements of this job? Yes No

If Yes, please provide further details:

If selected for interview, do you require any assistance/adaptations to help you attend? Yes No

If Yes, what assistance/adaptations do you require?

Have you any connections to anyone associated with Social Care Alba? Yes No

If Yes, please provide further details:

Rehabilitation of Offenders Act 1974 – This position is exempted under the act. All applicants are required to undertake criminal record and other checks prior to employment.

Have you any convictions that are not spent under Rehabilitation of Offenders Act? Yes No

If Yes, please provide further details:

References - One reference must be your current or most recent employer

Referee 1

Title (Mr, Mrs etc):

Full Name:

Job Title:

Organisation:

Address:

Postcode:

Tel No:

E-mail address:

Fax No:

Please state if we may obtain
this reference prior to interview.

Yes

No

Referee 2

Title (Mr, Mrs etc):

Full Name:

Job Title:

Organisation:

Address:

Postcode:

Tel No:

E-mail address:

Fax No:

Please state if we may obtain
this reference prior to interview.

Yes

No

Declaration

I certify that all statements given above by me on this form are true and correct to the best of my knowledge, I realise that if I am employed and it is found that such information and all other documents associated with the recruitment and selection process is false or that I have withheld information I am liable to dismissal without notice.

Digital Signature:

Date:

I consent to the Social Care Alba and its agents processing, by means of information and communication technology or otherwise, any information which I provide to them for purposes of recruitment to and employment with Social Care Alba, monitoring the effectiveness of Social Care Alba's Equal Opportunities Policy, and, in the exercise of Social Care Alba's legitimate interests.



Equality and Diversity Recruitment Monitoring Form

Job Ref:

In compliance with our Equality and Diversity Policy, we are monitoring job applications to make sure discrimination on the grounds of sex, sexual orientation, gender reassignment, race, ethnic origin, religion, marital status, age and disability do not occur. We would be grateful if you would complete and return this form with your employment/job application form.

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Gender: Male Female

Preferred Title: Miss Mr Mrs Ms Dr Other

Full Name:

Marital Status: Married Single Separated Divorced Widowed Other

Ethnic Origin: White British White Irish White Other Black/Black British

Asian Asian British Chinese Mixed Other

Do you consider yourself to be disabled under the Disability Discrimination Act?: Yes No

(The Disability Discrimination Act (1995) defines disability as "a physical or mental impairment which has a substantial and adverse effect on a person's ability to carry out day to day activities".)

If yes, what is the nature of your disability? (optional):

Age Range: 16-24 25-34 35-44 45-54 55-64 65+

The information you have provided here will be stored either on paper records or a computer system in accordance with the Data Protection Act 1998 and will be used solely to monitor the diversity of Social Care Alba's recruitment regarding Equal Opportunity issues.

Save and submit form ►