**APPLICATION FOR EMPLOYMENT**

**Private and Confidential**

Generic

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**Notes for Completion**

This application form is our initial screening process which will initiate an invite to interview for suitable candidates.

* Read all of the form first to understand what information is requested and how to complete all of the sections accurately
* Make sure you have reviewed all relevant information about the job, including the job description and person specification
* Please let us know if you would prefer this form in another format and we will arrange to have the application form made available (such as tape, Braille or large print)
* Complete **all sections** of the form either typed or in black ink. Insert an X in question boxes that do not require a written answer. Any incomplete sections may result in your application being rejected
* If you use any additional sheets, ensure you put your name (initials and last name only) and the vacancy reference number on each sheet. If you complete the form on a computer, it should expand automatically for you, and sections may move to the next page. This is acceptable and does not require adjustments by you
* Once completed, please return this form to [hr.fct@onfife.com](mailto:hr.fct@onfife.com)

**Section 1**

|  |  |
| --- | --- |
| Post Details | |
| Job Title |  |
| Vacancy Ref No |  |
| Location |  |
| Where did you view the advert for this post? |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Personal Details | | | | |
| First Initial |  | Surname |  | |
| Address |  | | | |
| Postcode |  | | | |
| Home Tel No |  | Mob No |  | |
| Email Address |  | | | |
| To ensure fairness and openness, please state by marking an X in the appropriate box whether you have any close connection with a senior employee of OnFife or a member of the Board | | | Yes |  |
| No |  |
| If Yes, please provide details |  | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Driving Licence | | | | | | | | |
| *Please give the following information* ***only*** *where the job information states that driving is an essential part of the post. Mark each answer with an X as necessary* | | | | | | | | |
| *Do you hold a valid driving licence?* | | | | | *Yes* | |  | |
| *No* | |  | |
| Categories of licence (s) held | *Car* |  | *C1* |  | | *HGV* | |  |

|  |  |  |
| --- | --- | --- |
| employer_small  Disability Confident Employer  *(please see guidance notes for advice on this section)* | | |
| If you have a disability and can offer the skills and experience that we consider essential for this post, we will guarantee you an interview. | | |
| *Do you consider yourself to have a disability?* | *Yes* |  |
| *No* |  |
| *Do you wish your application to be considered under this scheme?* | *Yes* |  |
| *No* |  |
| *If yes. Please give any information you feel may be relevant to your ability to carry out the duties of the post.* | | |

**Section 2**

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**Employment & Education**

* We are interested in any relevant skills and knowledge you may have, whether gained in employment or outside the workplace, so please include any unpaid, voluntary work, or other roles you may have had
* Please give details of any previous employment with OnFife, including Fife Council’s Libraries, Arts and Museums & Archives
* Remember to describe your work or role, as it is you we are interested in, not the team or business you are/were part of

|  |  |
| --- | --- |
| *Present/most recent Employment/voluntary work/relevant personal experience* | |
| Post Title |  |
| Name and address of employer |  |
| Dates of employment | *From To* |
| Salary |  |
| Duties/Responsibilities |  |
| Experience Gained |  |
| Reason for leaving |  |
| Notice period |  |

|  |  |  |
| --- | --- | --- |
| *Previous Employment/Voluntary Work/Relevant Personal experience*  *Please list in date order, with most recent listed first up to a max of 10 years.* | | |
| Dates From / To | *Employers Name & Address* | *Post Title*  *Duties, responsibilities, experience gained and reason for leaving* |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| *Education, Qualifications and Training* | | | |
| Please give details of any courses/training, vocational or professional qualifications relevant to this application whether or not it led to a qualification. | | | |
| *Course Title* | *Qualification or Result (including expected results)* | *Study Method*  *(part/full/home)* | *Course Duration* |
|  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Membership of Relevant Professional or Technical Bodies* | | | | |
| *Institution or Association* | *How obtained*  *(eg Exam or Election)* | *Date Obtained* | *Grade of Membership* | *Still Valid (Yes/No)* |
|  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Professional Registration *(please complete as appropriate)* | | |
| *For any membership of any professional body* | *Name of issuing Body* |  |
| *Registration No* |  |

**Section 3**

**Supporting Statement**

As part of your application, we ask you to provide additional information which you feel particularly relates to this post and indicate how your specific skills and abilities demonstrate your suitability for this post.

Without a Supporting Statement, your application **will not** be progressed. Your Supporting Statement must not be a CV.



**Declaration**

The information you give on this application is used for selection purposes and also forms the basis of any subsequent employment relationship. If you are successful, we will keep this application in your personnel file. Otherwise, it will be destroyed when the recruitment process is completed.

I declare that the information given in this application form is accurate, truthful and my own words. I understand that giving false information, or withholding information that may be relevant, I may be excluded from the recruitment process or dismissed if appointed to the post.

I consent to the use of my personal information in the above stated purposes.

***(Submitting the form by e-mail gives this consent)***

Signature …………………………………….

Name (Print) ……………………..……………..

Date …………………………………….