



YMCA GLENROTHES APPLICATION FORM IN CONFIDENCE

1. Please read the Job Application Pack and complete this form in black ink or type.
2. The post for which you have applied comes within the scope of requiring a PVG Check.
3. Should you be offered employment, you will be required to complete a PVG Form.
4. Please specifically address the criteria detailed in the Person Specification.
5. Only the information given in this application form will be considered in determining whether or not you will be called for interview.
6. CVs will not be considered.
7. Please ensure your total completed application form is not more than 5 sides long.
8. Please expand all boxes as necessary.

1. JOB DETAILS	
Post applied for	Location
2. PERSONAL DETAILS	
Surname	Initials <i>(initial only)</i>
Address	Telephone Home
Postcode	Work May we contact you there? YES/NO
Email	
Applicants will be required to provide documentary evidence of their right to work in the United Kingdom if invited for interview	
Do you have the right to work in the United Kingdom? YES/NO	
If appointed, when could you take up the position?	
If you are currently employed, what notice period are you required to give?	
Have you had any previous contact, or do you have any current contact with the YMCA-YWCA? YES/NO If Yes, please give details	
Do you hold a current UK driving licence? YES/NO/NOT REQUIRED FOR THIS POST	

3. EDUCATION, TRAINING AND DEVELOPMENT

Please list your academic and relevant qualifications, and dates passed (you will be asked to provide proof should you be successful at interview)

Qualifications	Date (<i>month/year</i>)	Place of study
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Please describe other relevant learning opportunities, e.g. training courses

Learning Opportunity	Date (<i>month/year</i>)	Place of study
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4. PRESENT OR LAST EMPLOYER

Employer's name and address

Post Held

Date commenced (and left, if appropriate)

Please give a brief description of your duties and responsibilities

If this is your current job, will you be keeping this or any other paid employment **along with** any job offered by the Association? This is to ensure we comply with the Working Time Directive. Yes/No.

If yes, please advise below, the number of hours per week you will be working with another employer/s

5. PREVIOUS EMPLOYMENT AND EXPERIENCE

Please give details of previous paid and voluntary employment. For each job, detail dates of employment, employer and duties undertaken, starting with the most recent

Dates <i>(month/year, from-to)</i>	Employer	Duties undertaken
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Please give details of any relevant skills/experience gained outside employment

(continue on additional sheet if necessary)

6. REFERENCES

Please give the name and address of two referees, one of whom should be your current or most recent employer who can comment on your suitability for this position. If you were known by a different name, please also state this. **No reference will be sought without your consent**

Referee 1

Name

Position

Address

Postcode

Telephone No

In what capacity does this person know you?

Referee 2

Name

Position

Address

Postcode

Telephone No

In what capacity does this person know you?

8. SUPPORTING INFORMATION

Please detail how you meet the person specification for this position, illustrating with examples from work, voluntary or life experiences, and stating why you are applying for this position

8 DECLARATION

I confirm that the above information is correct. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable for dismissal.

I consent to the organisation using and keeping information I have provided on this application or elsewhere as part of the recruitment process and/or personal information supplied by third parties such as referees, relating to my application or future employment. I understand that the information provided will be used to make a decision regarding my suitability for employment and if successful the information will be used to form my personnel record and will be retained for the duration of my employment. If I am not successful, I understand that the organisation will retain the form for as long as is deemed necessary and that the organisation may use it to contact me in the event of there being any other vacancies for which I may be suitable.

SIGNED

*(Please use first name
initial only)*

DATE

Please return this application form to : teamadmin@ymcaglenrothes.co.uk

If invited to interview you will be required to sign the application form in person.