|  |  |
| --- | --- |
| Position applied for |  |
| How did you hear of this vacancy? |  |

**Personal details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First name |  | | Surname |  |
| Address line 1 |  | | Home Tel no |  |
| Address line 2 |  | | Mobile Tel no |  |
| City |  | | Email |  |
| Postcode |  | |  | |
| Interests, achievements and leisure (i.e. hobbies, sports, memberships) | |  | | |

**Screening Questions**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you currently hold a full driving licence and have access to a car? | | | Yes / No | |
| Do you have any endorsements? | | | Yes / No | |
| If yes, please give full details |  | | | |
| Are you involved in any activity which might limit your availability to work or your working hours | | | Yes / No | |
| If yes, please give full details |  | | | |
| Are you subject to any restrictions or covenants which might restrict your working activities? | | | Yes / No | |
| If yes, please give full details |  | | | |
| You must be willing to work evening and weekends as required, can you commit to this | | | Yes / No | |
| Can you confirm that you are a non-smoker/vaper | | | Yes / No | |
| Are you a PVG Scheme Member? | Yes / No | If yes, please provide PVG scheme membership number | |  |
| If offered employment, you will be required to complete a Medical Questionnaire. Are you prepared to undergo a medical examination before starting employment? | | | Yes / No | |
| Have you ever worked for this Company before? | | | Yes / No | |
| Have you applied for employment with this business before? | | | Yes / No | |
| Do you need a work permit to take up employment in the U.K.? | | | Yes / No | |

**Education**

|  |  |  |  |
| --- | --- | --- | --- |
| Secondary Schools | From | To | Examinations and Results |
|  |  |  |  |
| College or University | From | To | Courses and Results |
|  |  |  |  |
| Further Formal Training | From | To | Diploma/Qualification |
|  |  |  |  |
| Job related Training Courses  Name of Organisation | Date | To | Subject |
|  |  |  |  |
| Please give details of membership of any technical or professional associations | |  | |
| Please list languages spoken and the level of competence | |  | |

**Employment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you currently employed? | | | Yes / No | |
| How much notice are you required to give to your current employer? | | |  | |
| Please give details of your employment, including your present or most recent employer, stating the most recent first. | | | | |
| Name and address of employer | Dates | Position held/Main duties | | Reason for leaving |
|  |  |  | |  |
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|  |  |  | |  |
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|  |  |  | |  |

**Criminal Convictions**

|  |  |  |
| --- | --- | --- |
| Have you any convictions, including both spent and unspent convictions under the Rehabilitation of Offenders Act 1974? (A copy of the Company’s Equal Opportunities Policy and Disclosure and Disclosure Information Policy is available on request. These reflect the CRB/Disclosure Scotland Codes of Practice) | | Yes / No |
| If yes, please give full details |  | |

**Additional information**

Please use the space below to provide any further information to support your application.

|  |
| --- |
|  |

**Declaration**

I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable to summary dismissal. I understand these details will be held in confidence by the Company, for the purposes of ongoing personnel administration and payroll administration in compliance with the Data Protection Act 1998. I undertake to notify the Company immediately of any changes to the above details.

Given the nature of the job for which I have applied, I understand that any offer of employment will be subject to information on my criminal record being disclosed to the Company by the Criminal Records Bureau / Disclosure Scotland. I have been given a copy of the Company’s Equal Opportunities Policy, which includes information relating to the recruitment of ex-offenders.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Signed |  | Printed |  | Date | |  |
| Please initial this box to accept terms if completing form electronically | | | | |  | |

**References**

Please give the names of two people (one of which should be your present or most recent employer) whom we may approach for a reference.

|  |  |  |  |
| --- | --- | --- | --- |
| Can we approach your current employer before an offer of employment is made? | | | Yes / No |
| **Referee 1** | | **Referee 2** | |
| Name |  | Name |  |
| Position |  | Position |  |
| Company |  | Company |  |
| Address |  | Address |  |
| Postcode |  | Postcode |  |
| Tel num: |  | Tel num: |  |
| Email |  | Email |  |

Please return completed applications to:

HR Dept.

Geeza Break

1450-1456 Gallowgate

Parkhead

Glasgow

G31 4ST

Or email [info@geezabreak.org.uk](mailto:info@geezabreak.org.uk) ensuring to note in the subject – APPLICATION FORM – [position applied for]