



Ayr Housing Aid Centre scio

South Ayrshire Independent Housing Information, Advice, Advocacy and Engagement Services

7 York Street, Ayr KA8 8AN
Tel: (01292) 288111
Text & WhatsApp Advice: 07549 603895
(Open)

Website: www.ayrhousingaidcentre.com
E-mail: info@ayrhousingaidcentre.com
Chief Executive Officer: Suzanne Slavin BSc

CONFIDENTIAL
AN EQUAL OPPORTUNITIES EMPLOYER

APPLICATION FORM FOR POST OF:-

SECTION A

PERSONAL DETAILS
Full Name:
Any previous names by which you have been known:
Email:
Telephone:
Address:
Postcode:
How long have you lived at the above address?
If less than 12 months, please give your previous address (including postcode):
Do you have a current Driving Licence?
Have you completed or are working towards relevant qualifications?
Do you have a PVG membership or a Disclosure certificate? If so, please give details:

SECTION B

PRESENT/MOST RECENT POST

Name and address of Employer/Volunteer Organisation:

Post held/Summary of role and responsibilities:

Dates employed/volunteered:

Salary: £

Please give reason for leaving or why wanting to leave:

PREVIOUS EXPERIENCE

NAME AND ADDRESS OF EMPLOYER:	START & END DATES	POST HELD, SUMMARY OF RESPONSIBILITIES, SKILLS TRANSFERRABLE TO THIS POST: ROLE, USED

SECTION C

Please give details of any previous experience you may have of working with vulnerable adults/Service Users/homeless people and skills you can use within this role and to the Centre.

SECTION D

Please give details of any relevant qualifications, training and/or personal qualities you feel equip you to perform well in this role.

SECTION E

SUPPORT STATEMENT

Please state why you are applying for this post, and give some specific examples that illustrate your experience relevant to the job spec and to the role

SECTION F

INTERVIEW ARRANGEMENTS & AVAILABILITY

If you have a disability, please tell us if there are any reasonable adjustments we can make to help you in your application or with our recruitment process

Are there any dates when you will not be available?

When could you start?

RIGHT TO WORK IN THE UK

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

SECTION G

REFEREES	
Please give the name and contact details of 2 suitable referees. At least one should have knowledge of any previous work you may have undertaken in a professional capacity e.g. Supervisor/Manager.	
Please tick the box if you have any objections to a referee being contacted prior to interview <input type="checkbox"/>	
REFEREE 1	
Name:	Designation:
Email:	
Address (including postcode):	Telephone:
In what capacity do you know this person (Manager/Supervisor, etc)?	
REFEREE 2	
Name:	Designation:
Email:	
Address (including postcode):	Telephone:
In what capacity do you know this person (friend, colleague, etc)?	

SECTION H

CANDIDATES DECLARATION	
I confirm that all information in this form is, to my knowledge, correct. I accept that false information or omission may lead directly to dismissal without notice; and that canvassing of members of the Council/Centre, directly or indirectly in connection with this post will disqualify me.	
Signature.....	Date.....

PLEASE RETURN:-

3 Forms – (Application, Equal Opportunities Monitoring and Self Declaration) to:-

recruitment@ayrhousingaidcentre.com

The information you give us in this form will be treated in the strictest confidence and complies with our GDPR Policy and procedures.

EQUAL OPPORTUNITIES MONITORING FORM

Ayr Housing Aid Centre SCIO operates an Equal Opportunities recruitment and selection policy which ensures that no job applicant or employee is treated less favourably than any other. For the policy to be effective, detailed monitoring of applications requires to be carried out to ensure that no candidate is discriminated against on the grounds of gender, race, colour, nationality, ethnic or national origins, marital status, disability, sexuality or age.

Your assistance would be appreciated in providing information which will be treated in the strictest confidence and will be used simply to provide a statistical profile of the applicants for each job. The information will not be made available to any person involved in the selection process.

Thank you for your co-operation.

PLEASE TICK THE APPROPRIATE BOX

<p style="text-align: center;">SEX</p> <p>Are You?</p> <p>Male <input type="checkbox"/></p> <p>Female <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Prefer not to say <input type="checkbox"/></p> <hr/> <p style="text-align: center;">MARITAL STATUS</p> <p>Are You?</p> <p>Married <input type="checkbox"/></p> <p>Not Married <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <hr/>	<p style="text-align: center;">ETHNIC ORIGIN</p> <p>Are You?</p> <p>White <input type="checkbox"/></p> <p>Black – African <input type="checkbox"/></p> <p>Black – Caribbean <input type="checkbox"/></p> <p>Black – Other (please specify) <input type="checkbox"/></p> <p>.....</p> <p>Indian <input type="checkbox"/></p> <p>Bangladeshi <input type="checkbox"/></p> <p>Pakistani <input type="checkbox"/></p> <p>Chinese <input type="checkbox"/></p> <p>Other (please specify) <input type="checkbox"/></p> <p>.....</p>	<p style="text-align: center;">AGE</p> <p>Are You?</p> <p>Aged Under 21 years <input type="checkbox"/></p> <p>21 – 30 <input type="checkbox"/></p> <p>31 – 40 <input type="checkbox"/></p> <p>41 – 50 <input type="checkbox"/></p> <p>51 – 60 <input type="checkbox"/></p> <p>Over 60 <input type="checkbox"/></p> <hr/> <p style="text-align: center;">DISABILITY</p> <p>Are You?</p> <p>Registered Disabled <input type="checkbox"/></p> <p>Disabled (not Registered) <input type="checkbox"/></p> <p>Not Disabled <input type="checkbox"/></p>
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POST DETAILS

POST APPLIED FOR :

Section 2

Non-conviction relevant information e.g. are there any ongoing investigations or complaints which could impact on your employment?

Section 3

Declaration **(I certify that all information contained in this form is true and correct to the best of my knowledge and realise that false information or omissions may lead to dismissal).**

Signature: _____

Date: _____

NOTE: The information given in this form will be treated in the strictest confidence. Please seal this form in the addressed envelope provided and return prior to your interview.