**First save this form under another name. To complete this form, point your mouse arrow on to the highlighted portions OR use your tab key to move between the highlighted fields and start typing. You must complete the application form in full as we do not accept CVs.**

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|  | | | | | | **PART A** | | |
| **Application for (Job Title):** | | | | | | **Job Reference No:** | | |
| **Location:** | | | | | | **Candidate ID No:** | | |
| No applicant will be unfairly discriminated against. We are particularly alert to eliminating discrimination on account of age, cultural/religious/political belief, disability, ethnicity, gender, race, relationship status, sexual orientation, and/or Trade Union membership or stewardship.  **Only 'Part C' of this form will be made available to short-listing panels.  Parts A, B and C would then be used by the interviewing panel if you are selected for interview.** | | | | | | | | |
| **Personal Details** | | | | | | | | |
|  |  | |  |  | | | |  |
| Surname: |  | | Forename: |  | | | |  |
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| Name known: by (if different) |  | | | Title: | | |  |  |
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| Address: |  | | | | | | | |
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|  |  | | | Post Code: | | |  | |
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| Contact Telephone Numbers: | | | Day: |  | | | | |
|  | | |  |  | | | | |
| Evening: |  | | Mobile: | |  | | | |
|  | |  | |  | | | | |
| E–mail: address (if we may use this): |  | | | | | | | |
|  |  |  |  | | | | | |
| If we need to, the best way for us to contact you is by: | | | | | | | | |
| **Work Permit** | | | | | | | | |
| Do you need a work permit to take up this post? | | | | Yes | | | No | |
|  | | | |  | | |  | |
| **Working in the UK** | | | |  | | |  | |
| Are you eligible to work in the UK? | | | | Yes | | | No | |
|  | | | |  | | |  | |

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| **Job Reference No:**  **Job Reference Number:** |  | | **PART B** | |
| **Candidate ID No:** |  | | | |
| **Declarations** | | | | | | |
| **Criminal Convictions Declaration**  In September 2015 the Scottish Government made changes about what conviction information needs to be disclosed. [*Some offences must always be disclosed, some offences do not need to be disclosed and some offences must be disclosed in specified circumstances.*] The rules are complicated, so it is important you read the guidance below as part of making your application.  NHS Scotland is exempt from the 1974 Rehabilitation of Offenders Act (Exclusions & Exceptions) (Scotland) Order 2003. As part of any offer of employment candidates will be subject to one of the following:   * For posts in regulated work – Protection of Vulnerable Groups Scheme membership * For all other posts which are subject to a criminal conviction record check – A Police Act check * *For posts not subject to a criminal conviction record check* – A self-declaration   For more information on which category this post falls under please refer to the job pack, job description or person specification.  For more information on the rules visit:  <https://www.mygov.scot/convictions-higher-disclosures/?via=http://www.disclosurescotland.co.uk/SummaryoftheChanges.htm>  For more information on offences which **must always** be disclosed:  <https://www.mygov.scot/disclosure-types/?via=http://www.disclosurescotland.co.uk/documents/HigherLevelDisclsoure--revisedAlwaysDiscloseList--8February2016.pdf>  For more information on offences which are to be disclosed subject to rules:  <https://www.mygov.scot/disclosure-types/?via=http://www.disclosurescotland.co.uk/documents/HigherLevelDisclosure--revisedRulesList--8February2016.pdf> | | | | | | |
| **Declaration:**  Please read the following statements. You will be asked to sign a declaration if you are appointed:   * I have completed Parts A to D of this application form and the details I have supplied are, to the best of my knowledge, true and complete; * I understand that if appointed to this post the information on this form will be kept as part of my personal file record; * I authorise you to obtain references to support the application if I am identified as a preferred candidate; * I understand that details of educational qualifications, membership of professional bodies and referee report may be verified through the establishments and individuals I have indicated; * I consent to my details being kept confidentially and used for specific and lawful purposes as specified in the Data Protection Legislation; * I agree to complete a criminal convictions check or a criminal convictions declaration form, if I am identified as the preferred candidate. | | | | | |
| **Read, agreed and understood (check box)** | | **Date:** | |  | | |

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|  | | | | | | **PART C** | | | | |
| **Application for (Job Title):** | | | | | | | **Job Reference No:** | | |
| **Location:** | | | | | | | **Candidate ID No:** | | |
| **Qualifications Achieved** | | | | | | | | | |
| Subjects | | Type of Qualification  eg. Standard Grade, GCSE, Higher, BSc | | | | | | Grade Achieved | |
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| **Qualifications Currently Studying or Working Towards** | | | | | | | | | |
| Subjects | Type of Qualification  eg. Standard Grade, GCSE, Higher, BSc | | | Grade Anticipated | | | | | Date Anticipated |
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| **Membership of Professional or Regulatory Bodies** | | | | | | | | | |
| Full name of organisation(s) | | | Registration Number | | Renewal Date | | | | |
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| **Job Reference No:** | | | | |  | | | | | | | | | | **PART C** | | |
| **Candidate ID No:** | | | | |  | | | | | | | | | | | | |
| **Present (or most recent) Post** | | | | | | | | | | | | | | | | | |
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| Job Title: | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | | | | | |
| Grade: | |  | | | | | | | | Date of Starting Grade: | | | | | |  | |
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| Employer: | | |  | | | | | | | | | | | | | | |
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| Dates of Employment: | | | | | | | From: | |  | | | To: | |  | | | |
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| Reason for Leaving (if applicable): | | | | | | | |  | | | | | | | | | |
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| Notice Period: | | | |  | | | | | Current Salary: | | | |  | | | | |
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| **Role Purpose / Summary of Responsibilities** | | | | | | | | | | | | | | | | | |
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| **Employment History** | | | | | | | | | | | | | | | | | |
| Start with your most recent employment first and work down the page. If a job supports the position applied for, please say more about it in your Application Support Statement. | | | | | | | | | | | | | | | | | |
| **Job Title** | | | | | | **Employer** | | | | | | **Date From** | | | | | **Date To** |
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| **Job Reference No:** | | | |  | | | | | | | | | | | | | **PART C** |
| **Candidate ID No:** | | | |  | | | | | | | | | | | | | |
| **Referees** | | | | | | | | | | | | | | | | | |
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| Your referees will include your present (or most recent) employer. Please identify below the person in your organisation. Please identify a second referee who may have closer knowledge of your skills, knowledge and abilities and who may offer opinion on your suitability for this post. **You should not use family members or friends.** Our pre-employment screening also includes, where appropriate, health and fitness for work, criminal records, qualifications and professional registration. **Note that references will only be taken up for Preferred Candidates following interview.** | | | | | | | | | | | | | | | | | |
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| **Name 1:** | | |  | | | | | Designation: | | | | | |  | | | |
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| Address: | | |  | | | | | | | | | | | | | | |
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| Telephone: | | |  | | | Email: | | | | |  | | | | | | |
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| **Name 2:** | |  | | | | | Designation: | | | | | |  | | | | |
|  | |  | | | | |  | | | | | |  | | | | |
| Address: | |  | | | | | | | | | | | | | | | |
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| Telephone: | |  | | | Email: | | | | |  | | | | | | | |
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| **Disability** | | | | | | | | | | | | | | | | | |
| The Disability Discrimination Act 1995 and Amended Regulations 2005defines disability as follows: “any physical or mental impairment which has a substantial adverse effect on a person’s ability to carry out normal day to day activities”. Best Company is “Positive About Disabled People”, and as such we provide job opportunities for disabled people. Best Company operates **a Job Interview Guarantee (JIG),** which means that if you have a disability, **and meet the minimum criteria outlined within the person specification**, you will be guaranteed an interview. However, some disabled people prefer not to take this option, so please tick your preference if you are a disabled candidate.  **Do you want to participate in the guarantee scheme? Yes**  **No**  Please specify any special requirements you require if attending for interview,  eg. Induction Loop, Wheelchair Access, Signer | | | | | | | | | | | | | | | | | |
| **Driving Licence (see Job Description - only** **complete if a driving licence is essential)** | | | | | | | | | | | | | | | | | |
| Do you have a driving licence? **Yes**  **No**  If yes, which categories are you entitled to drive,  eg. B, BE, C | | | | | | | | | | | | | | | | | |
| **Job Reference No:** | | | |  | | | | | | | | | | | | | **PART C** |
| **Candidate ID No:** | | | |  | | | | | | | | | | | | | |
| **Statement in Support of Application –** please tell us your personal qualities, skills and attributes, experience and any major achievements and show how they match those needed for this job. | | | | | | | | | | | | | | | | | |
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| **Where did you see the Advertisement for this Post?** | | | | | | | | | | | | | | | | | |
| Newspaper (which one?) | | | | | | | | | | | | | | | | | |
| Professional Journal (which one?) | | | | | | | | | | | | | | | | | |
| Vacancy Bulletin | | | | | | | | | | | | | | | | | |
| SHOW (NHS Scotland Website) | | | | | | | | | | | | | | | | | |
| Job Centre Plus | | | | | | | | | | | | | | | | | |
| Other (please specify) | | | | | | | | | | | | | | | | | |

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| **Job Reference No:** | | | | | | | | | | |  | | | | | | | | | | | | **PART D** | | | | | |
| **Candidate ID No:** | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Equal Opportunities Monitoring** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| We want to ensure that our job opportunities are open to all. The only way we can ensure there is equal opportunity is to monitor applications we receive and compare the profile of people who apply with those appointed. Therefore, this form asks you for your ethnic origin, gender, disability, religion, sexuality and age. **The information you provide in this part of the form (Part D) is confidential and is not used in the selection process. It will be separated from the rest of the form when we receive it.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **1)** **If you are currently an employee of this Best Company, will getting this job be a promotion?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Yes | | No | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **2)** **Which one of the following best describes your gender?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Male | Female  In Another Way  Prefer not to say | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | If you describe your gender with another term, please provide this here | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **3)** **Do you consider yourself to be a trans person?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Yes | | | | No | | | | Prefer not to say | | | | | | | | | | | | | | | | | | | | |
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| Trans is an umbrella term to describe people whose gender is not the same as the sex they were assigned at birth. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **4)** **What is your age?** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| I am       years old, and my date of birth is: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **5)** **Do you have a physical or mental health condition or disability that:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| * has a substantial effect on your ability to carry out day to day activities? * has lasted or is expected to last 12 months or more? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Yes | | | | No | | | | Prefer not to say | | | | | | | | | | | | | | | | | | | | |
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| * If you answered **‘yes’** please tick if it is either of the following: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Learning Disability  Long standing illness  Mental health condition | | | | | | |  | | | | | | | | Physical impairment  Sensory impairment | | | | | | | | |  | | | | |
| Other (please describe): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * Again, if **yes**, please describe any particular arrangements you would need for your work location: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Job Reference No:** | | | | | | | | | | |  | | | | | | | | | | | | **PART D** | | | | | |
| **Candidate ID No:** | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **6) What is your nationality?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a) Nationality at birth  b) Present nationality | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **7) What is your ethnic group?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Choose **one** section from A to F, then **tick** the appropriate box to indicate your cultural background | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **A: White** | | | Scottish | | | | | | | | | | Irish | | | | | | Other British | | | | | |  | | | |
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|  | | | Any other White background | | | | | | | | | | | | | | | | | | |  | | | | |  |  |
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| **B: Mixed** | | | Any mixed background | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **C: Asian; Asian Scottish; Asian British** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | Pakistani | | | | | | | | Indian | | | | | | Chinese | | | | | |  | | | |
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|  | | | | | Bangladeshi | | | | | | | | Any other Asian background | | | | | | | | | | | | | | | |
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| **D: Black; Black Scottish; Black British** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Caribbean | | | | | | | | | | African | | | | | |  | | | | | |  | | | |
|  | | | Any other Black background | | | | | | | | | | | | | | | | |  | | | | | | | | |
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| **E: Other ethnic background** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Any other background | | | | | | | | | | | | | | |  | | | | | | |  | | |
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| **8) To which religion, religious denomination or body do you actively belong?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | (Christianity) - Church of Scotland | | | | | | | | | | | | | | | | | | Hinduism | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | (Christianity) - Roman Catholic | | | | | | | | | | | | | | | | | | Sikhism | | | | | | |  |
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|  | | | Christianity (other) | | | | | | | | | | | | | | | | | | Judaism | | | | | | |  |
|  | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  |
|  | | | Other faith / belief | | | | | | | | | | | | | | | | | | Islam | | | | | | |  |
|  | | | | |  | | | | | | | | |  | | | | | | |  | | | |  | | |  |
|  | | | Buddhism | | | | | | | | | | | | | | | | | | No religion (none) | | | | | | | |
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|  | | | Prefer not to answer | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| **9) Which of the following best describes your sexual orientation?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | Heterosexual/straight | | | | | | | | | | | | | | | | Bi/bisexual | | | | | | | |
|  | | | | |  | | | | | | |  | | | | | | |  | | | | | | |  | | |
|  | | | | | Gay/lesbian | | | | | | | | | | | | | | | | Prefer not to say | | | | | | | |
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|  | | | | | If you prefer to use another term, please provide this here | | | | | | | | | | | | | | | | | | | | | | | |
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