

APPLICATION FOR TRAINEE VACANCIES

FacilityVARIOUS FACILITIES..... Closing Date ...SUNDAY 20 JANUARY 2018, 5PM....

Before completing this application form, please read the guidance notes provided.

1. Personal Information

Surname (<i>in capitals</i>)		Date of Birth/...../.....	
Forename (s)			
Home Address			
.....			Postcode.....
Mobile Number:		Home	
Email:			
Scottish Candidate No:		Nat Insurance No:	
Do you hold a current full valid driving licence?		Yes <input type="checkbox"/> No <input type="checkbox"/>	

2. Name and Address of Referees

List two people not related to you who are able to give information with regard to your character. One referee must be your Head Teacher or Pupil Support. If you have work experience please give your current or most recent employer.

Name	Name
Address	Address
.....
.....
E-mail	E-mail
Telephone No.	Telephone No.
Capacity in which known	Capacity in which known

3. Education

When did you, or when will you, leave full time education (school or college)?

Name of school or college attended

Qualifications

Give your results in the columns provided. Please include details of qualifications such as skills certificates like first aid, swimming, etc.

Subject	Nationals 4&5s	Highers	Others

Examinations not yet taken.

Tick the examinations you hope to take in each subject or the examinations you have taken and are awaiting the results.

Subject	National 4 & 5s	Highers	Others

4. Activities Outside School

Did you participate in work experience while at school? **Yes** **No**

If yes, please give details:

Employer: Nature of Business:.....
Duties and Hours of Work:

Have you had or do you have any full-time, part-time or holiday jobs? **Yes** **No**

If yes, please give details:

Employer Name :..... Nature of Business :.....
Date employed from: To :.....
Duties and Hours of Work:

Employer Name:..... Nature of Business :.....
Date employed from:..... To:.....
Duties and Hours of Work:

Please give details of your main interests, hobbies and activities outside school.
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5. Further Information In Support of Your Application

Please tell us why you are applying for this trainee post. Why do you think you would be a good candidate for this trainee vacancy. *You may continue on a separate sheet if necessary.*

6. Special Requirements

Please tell us if there are any 'reasonable adjustments' we can make to assist you in your application or with our recruitment process.

7. Pre-employment checks for Regulated Work or jobs requiring Basic Disclosure

Please complete and return the enclosed Declaration of Criminal Record form.

8. Declaration

I declare that all information which I have provided is correct. I understand that any false information given may result in a job offer being withdrawn or my employment terminated.

I understand that the data I have given may be processed by computer, or form the basis of manual records and give consent for my details to be retained in accordance with the Data Protection Act 1998.

Signed..... Date

Pre-employment Check for Regulated Work

Declaration of criminal record

The Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) as amended in 2013

The job you have applied for involves 'regulated work' with children and is exempt from the Rehabilitation of Offenders Act 1974 (as amended in 2013). To comply with the law we need information from you as a job applicant.

At interview, any employment offer will be conditional on gaining membership of the Protecting Vulnerable Groups Scheme (PVG).

Please declare below ALL criminal convictions , both spent and unspent convictions.

1. Does your name appear on the **list of those who are barred from working with children?** Yes No

2. Have you ever been convicted of a criminal offence? Yes No

If yes, please state:

Date	Offence	Disposal eg. fine

3. Have you ever been the subject of a caution? Yes No
If yes, please give details:

4. Are you aware of any police enquiries undertaken following allegations made against you, which may have a bearing on your suitability for this post? Yes No

If yes, please give details:

The information you give will be treated in strict confidence and will be used for this job application only. Personal data is carefully destroyed on conclusion of the recruitment process, unless required for new employee records. All sensitive data is handled in line with current Data Protection Regulations.

I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will disqualify me from appointment or may render me liable to dismissal without notice.

Full Name: _____
(please print)

Signature: _____ **Date:** _____

Job Applied For: Employed Trainee

This form should be returned in the envelope provided and SEALED, with your application form.



Applicants Name

Job Title

EMPLOYED TRAINEE

Please tick the box beside the facilities that you are interested in.
You may tick more than one.

TICK BOX

CLICKIMIN LEISURE COMPLEX

MORTH MAINLAND LEISURE CENTRE

RATES OF PAY:

16 – 17 years £155.40 per week

18 – 20 years £218.30 per week

Year 2 if aged 21 or over £273.06 per week

Average hours 37 per week – these may include some evening and weekend working.

*** SWIM TEST**

You must be able to complete the following:

- Swim 100m on front continuously
- Swim 100m on back continuously
- Swim 50m within 60 seconds
- Jump or Dive into deep water then tread water for 30 seconds
- Retrieve object from 1.5m of water, climb out of pool unaided

PLEASE PUT YOUR NAME AT TOP OF SHEET AND TICK FACILITY WHICH YOU ARE INTERESTED IN - AND RETURN WITH COMPLETED APPLICATION FORMS.

YOU MAY TICK MORE THAN ONE BOX.