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| Description: C:\Users\Alan\Documents\Bowls Scotland CEO\Marketing, Branding and Partnerships\Marketing\Bowls Scotland Logo jpeg.jpg | |
| **EMPLOYMENT APPLICATION – Administration Assistant** | |
| Please use black ink and fully complete the form. | |
| Application for the post of: Administration Assistant  Where did you see/hear about this post? |

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| **PERSONAL DETAILS** |

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| **Please complete this section in block capitals**  Surname: First Names:  Address:  Post Code:  Tel (Home): (Work):  Mobile:  E-mail address: |

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| **EDUCATION/QUALIFICATIONS** |

Please include colleges, University, full and part-time courses

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| **Name of Institution** | **Qualifications Obtained** | **Grade** | **Dates** |
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| **TRAINING** |

Please include any training activities undertaken including short courses or in-house training organised by your employer.

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| **Name of Institution** | **Title and Nature of Course** | **Dates** |
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| **MEMBERSHIP OF PROFESSIONAL BODIES** |

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| **Name of Institution/Organisation** | **Membership Status** | **Admission Date** |
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| **PRESENT EMPLOYMENT** |

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| **Name of Employer** | **Salary** | **Job Title** | **Notice Required** |
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| Description of Duties | | | |

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| **PREVIOUS EMPLOYMENT** (in chronological order) |

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| **Duration** | **Employer** | **Salary** | **Post Held/Duties** | **Reason for leaving** |
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| **FURTHER INFORMATION** |

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| Please give a general statement about the way in which you consider your skills, knowledge and experience to date is relevant to this post, and your reasons for applying.  You may wish to include reference to experience gained at work or in a voluntary capacity or any other interests you may feel relevant to your application. Use an additional sheet if necessary. |
| Please highlight the skills you have that are relevant to this post:- |
| **Do you: Own a car? Yes/No**  **Have you a current driving licence? Provisional/Full**  **Have you any current endorsements? (Give full details)** |
| **Are you in good health?** **Yes/No**. |

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| **REFEREES** |

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| Please state names and addresses of two persons from whom references may be requested. One must be your present or previous employer if not currently employed, and the other must be someone who knows you in a work related capacity, or if this is not possible then in an educational capacity, e.g. supervisor or tutor, who is able to comment on your aptitude for the post. **References are normally taken up after interview; please indicate below if you do not wish this to happen without your prior approval**.  **1. Name: Position:**  **Address:**    **Tel: E-Mail:**  **Please do not contact** **this referee** **without my prior approval**    **2. Name: Position:**  **Address:**    **Tel: E-Mail:**  **Please do not contact** **this referee** **without my prior approval** |

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| **REHABILITATION OF OFFENDERS ACT** |

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| **Have you ever been convicted of any criminal offence? YES/NO (see note below)**  **Note**: Under the Rehabilitation of Offenders Act 1974 you may be entitled to answer 'no' to this question even if you have, in the past, been convicted of an offence. However, certain types of employment are excluded, under the Rehabilitations of Offenders Act 1974 (Exemptions) Orders 1975, from the protection of the Act. It is therefore, suggested that you take appropriate advice if you are in any doubt as to the correct answer to give.  If yes, please specify the date of conviction, nature of offence and sentence imposed: |

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| **DECLARATION** |

It is our policy to employ suitably qualified personnel and to provide equal opportunity for the advancement of employees including promotion and training, and not to discriminate against any person in any way.

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| i Canvassing of Board Members directly or indirectly, will disqualify your application  ii The appointment is subject to satisfactory evidence of medical fitness  iii. If your application is successful, the information will form part of your personal file. If your application is unsuccessful, the data will be destroyed after six months.  I certify that my replies are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statements or withhold any relevant information this may result in subsequent dismissal or the withdrawal of any offer of appointment. I authorise references to be sought in support this application, subject to my permission at that time, and to release us and referees from any liability caused by giving and receiving information.  Signature: Date: |

All forms should be returned by **12:00 on Thursday 31st 2019** and marked private and confidential, to:-

Please return your application marked PRIVATE & CONFIDENTIAL to:

Gillian Boyce

Bowls Scotland

National Centre for Bowling

Hunters Avenue

Ayr

KA8 9AL

Or by email to: [gillianboyce@bowlsscotland.com](mailto:gillianboyce@bowlsscotland.com)

Telephone: 01292 501575