**APPLICATION FORM**

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| **Role applied for:** |

**1. Personal Details:**

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| Forename(s) Surname |
| Any previous name by which you’ve been known |
| Address Postcode | Home Tel No |
| Work No(please state if you don’t wish to be contacted at work) |
| Mobile No |
| Email Address |

**2. Training and qualifications**

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| From-To | Please give details of any training courses (e.g., coaching courses etc) or qualifications relevant to this application – you should include any Touch referee and coaching courses | Qualifications |

**3. Supporting Statement**

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| Please state how you think your skills and experience match the requirements of the job description and give your reasons for applying. Please include any relevant voluntary work (with dates) and technical skills which we should know about. |

**4. Additional Information**

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| Please tell us if you feel we will need to provide any additional support to enable you to fulfil this role e.g. in relation to health, mental health or disability. |

**5. Interview Availability**

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| Please advise of any dates you would be unable to attend an interview. |

**6. The Vacancy**

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| How did you learn of this opportunity? |

**7. References**

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| Please give details of two people willing to provide references (preferably with first-hand knowledge of your previous work with children). References from relatives will not be accepted. Let us know if you do not want us to contact a referee prior to interview.  |
| Name |  | Name |  |
| Address |   Postcode | Address |   Postcode |
| Tel No |  | Tel No |  |
| How do they know you? |  | How do they know you? |  |
| How long have they known you? |  | How long have they known you? |  |

**8. Declaration**

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| Data Protection Act In order to recruit to the post the Scottish Touch Association will (within the terms of the Data Protection Act 1998) process personal information given in connection with this application. Information relating to the successful applicant will form part of personnel records. No other use will be made of information about applicants.Consent I consent to the processing of personal information in the way described. I consent to Scottish Touch Association requesting a Scheme Record/Scheme Record Update (as appropriate) under the Protection of Vulnerable Groups (Scotland) Act 2007 if this is deemed relevant by the Scottish Touch Association for the nature of the post.Declaration I declare that to the best of my knowledge the information given on the form is true and correct. I understand that misleading statements or deliberate omission may be sufficient grounds for cancelling any appointment arising from my application. Signed Date |